## VIRGINIA DEPARTMENT OF TAXATION

www.tax.virginia.gov

## **PUBLICATION VA-1345**



**HANDBOOK** for **Electronic Filers** of Individual Income Tax Returns

Tax Year 2008

### **TABLE OF CONTENTS**

VIRGINIA CONTACT DIRECTORY	3
ELECTRONIC FILING CALENDAR FOR TAX PERIOD 1/1/08 - 12/31/08	
PUBLICATIONS FOR TAX PERIOD 1/01/08 – 12/31/08	
WHAT'S NEW -TAX YEAR 2008	6
REMINDERS	7
COMMON REJECT CODES	9
FEDERAL/STATE ELECTRONIC FILING PROCESS	10
VIRGINIA RETURNS	10
NAME, ADDRESS AND BANK INFORMATION	12
REFUND RETURNS	13
BALANCE DUE RETURNS	
RESPONSIBILITIES OF TAX PROFESSIONALS	14
E-FILE CHECKLIST	16
APPENDIX A - LOCALITY AND CITY CODES	18
APPENDIX B - ERROR REJECT CODES AND EXPLANATIONS	19
APPENDIX C - VIRGINIA FORMS AND FIELD NUMBERS	28

### **VIRGINIA CONTACT DIRECTORY**

TOPIC	SERVICES OFFERED	CONTACT INFORMATION
CUSTOMER SERVICE	Taxpayer Assistance M-F, 8:30 a.m 4:30 p.m.	804-367-8031 TaxIndReturns@tax.virginia.gov
TAX PROFESSIONAL HOTLINE	Tax Professional Assistance M-F, 8:30 a.m 4:30 p.m.	804-367-9286
TELETAX	Refund Inquiry Recorded Tax Information Fax on Demand Forms	804-367-2486
E-FILE HELP DESK	Fed/State ELF Software Developer, Tax Professional, and ERO Assistance	Mr. Leo Vaisvil 804-367-6100 leo.vaisvil@tax.virginia.gov
E-FILE ADMINISTRATOR	Fed/State ELF Software Developer, Tax Professional, and ERO Assistance	Ms. Tina Thoummarath 804-367-0240 tina.thoummarath@tax.virginia.gov
VATAX ONLINE	On-line Filing (iFile) Electronic Return Payments Electronic Bill Payments Tax Information	<u>www.tax.virginia.gov</u>
CREDIT CARD PAYMENTS	Credit Card Payments Made through Official Payments Corporation	800-272-9829 www.officialpayments.com

### **ELECTRONIC FILING CALENDAR FOR TAX PERIOD 1/1/08 – 12/31/08**

Begin Federal/State Software Testing

November 12, 2008\*\*\*

Submitting Test Transmissions No cut off date

Begin Transmitting Live Returns to IRS or VATAX

January 16, 2009\*\*\*

Last Date to Transmit VATAX Returns Electronically October 15, 2009\*\*\*

<sup>\*\*\*</sup>Dates subject to change \*\*\*

### PUBLICATIONS FOR TAX PERIOD 1/01/08 - 12/31/08

Handbook for Electronic Filers	<b>IRS</b> Pub. 1345	VATAX Pub. VA-1345
Electronic Return File Specifications and Record Layouts	Pub. 1346	Pub. VA-1346
Test Package	Pub. 1436	Pub. VA-1436

#### WHAT'S NEW -TAX YEAR 2008

Advancement of Virginia's Fixed Date Conformity with the Internal Revenue Code: The 2008 General Assembly enacted legislation that moved Virginia's fixed date conformity with the Internal Revenue Code from December 31, 2006, to December 31, 2007. At the time these instructions went to print, the only required adjustments for "fixed date conformity" were: (i) the special 30% and 50% bonus depreciation allowance for certain assets under the IRC, and (ii) the 5-year net operating loss (NOL) carry back allowed for net operating losses generated in taxable year 2001 or 2002. If federal legislation is enacted that results in changes to the Internal Revenue Code for the 2008 taxable year, taxpayers may be required to make adjustments to their Virginia returns that are not described in the instruction booklet. Supplemental instructions will be posted on our website: www.tax.virginia.gov.

Filing Threshold and Personal Exemption Amounts for Individual Income: Tax House Bill 3022 (Chapter 527) and Senate Bill 778 (Chapter 543) increase the individual income tax filing thresholds for single individuals from \$7,000 to \$11,250 for 2008 and 2009, \$11,650 for 2010 and 2011 and \$11,950 for 2012 and beyond. The bills increase the filing threshold for married couples from \$14,000 to \$22,500 for 2008 and 2009, \$23,300 for 2010 and 2011, and \$23,900 for 2012 and beyond. The bills also increase the personal exemption amount from \$900 to \$930 effective for taxable year 2008.

<u>Virginia Schedule VK-1, Owners share of income and Virginia Modifications and Credits:</u> Withholding reported on Virginia Schedule VK-1 will be included as a part of individual withholding.

<u>Warehouse of Direct Debit:</u> Payment warehousing is available for returns filed by May 1, 2009. For returns filed after May 1, 2009 the direct debit date must equal the transmission date. The debit will not occur until after an acknowledgement of filing acceptance.

<u>Amended Returns:</u> Amended Virginia Form 760CG, amended Virginia Form 763, and amended Virginia Form 763 may now be filed electronically.

**New Subtraction:** A new subtraction is available for non-resident tax payers who use VA form 763. This subtraction can be claimed when an owner of a pass-through entity may also need to file a Nonresident Form 763 return to report Virginia source income other than from the Pass-Through Entity. Income reported by the owner on a unified return would be subtracted under Pass-Through Entity Income using Subtraction Code 50.

<u>New Contributions:</u> New contributions for 2008 are Virginia Care Giver Grant Fund (91), Virginia Military Family Relief Fund (92).

<u>Contributions Removed:</u> The following contributions have been removed, Jamestown-Yorktown Foundation (75) and Governor's Office of Commonwealth Preparedness (87).

<u>Direct Deposit:</u> Direct Deposit will be allowed for Virginia Form 760CG, Virginia Form 760PY and Virginia Form 763.

**Electronic Filing Mandate:** House Bill 678 modifies a 2004 requirement that all income tax preparers who prepare tax returns for 100 or more taxpayers must file the return electronically. Filing returns on substitute forms using 2D barcodes no longer meet the electronic filing mandate.

**NOTE**: Electronic medium no longer includes filing a paper return containing 2D Barcode for transmitting a return electronically.

#### **REMINDERS**

<u>Automatic Registration:</u> Acceptance by the IRS as an ERO automatically qualifies tax professionals to submit Virginia individual income tax returns electronically using e-file. The tax professional must register with the IRS and be accepted as an Electronic Return Originator (*ERO*). The IRS assigns each ERO an Electronic Filer Identification Number (*EFIN*). After the tax professional is accepted as an ERO, the tax professional can submit returns via e-file using approved commercial tax preparation software. For more information, visit the IRS's web site at <u>www.irs.gov</u>.

<u>Form VA-8453</u>: Form VA-8453 is required when the PIN method is not utilized. The tax professional or taxpayer, if self prepared, should retain Form VA-8453, Virginia Individual Income Tax Declaration for Electronic Filing and required attachments, for three years from the due date or the filing date, whichever is later.

<u>Form VA-8879</u>: This form must be completed when an individual e-file return is being signed using the Practitioner PIN method. Both the taxpayer(s) and ERO must sign *Form 8879*. When the Practitioner PIN Method is used, *Form VA-8879* takes the place of *Form VA-8453*. The form should be retained by the ERO for a minimum of three years from the due date of the return or the file date, whichever is later.

<u>Direct Debit:</u> Taxpayers requesting a direct debit for a tax liability should expect the transaction to occur within 5-7 business days of the direct debit date. The direct debit date should not be older than the submission date.

**NOTE**: Payments scheduled for May 1 may not occur until after May 1 due to internal processes. Taxpayers should not be penalized for payments scheduled for May 1 and the debit occurred after the scheduled date.

<u>Direct Deposit:</u> Direct deposit of a refund is available for all form types to include Form 760CG, Form 760PY and Form 763.

**<u>Refund Inquiry:</u>** Refund inquiries can be made on-line at *www.tax.virginia.gov* or by Teletax at (804)367-2486.

760-PMT, Payment Voucher: Form 760-PMT, along with payment should be mailed to:

Virginia Department of Taxation PO Box 1478 Richmond, VA 23218-1478.

**NOTE**: Do not attach Form 760-PMT to a paper copy of the electronically filed return. This causes processing discrepancies and the payment will not be processed correctly.

<u>Electronic Filing Mandate:</u> If a tax professional prepares 100 or more individual income tax returns he/she is required to file electronically.

**<u>E-file Waiver:</u>** A tax professional may request a hardship waiver by submitting *Form 8454P*. The Tax Commissioner may waive the requirements for filing electronic returns for a period of time if the tax professional clearly demonstrates that the requirements place an undue hardship on the tax professional. Hardship waiver requests will be responded to within 45 days of receipt.

Taxpayers may "Opt Out" of filing electronically by completing *Form 8454T*. The tax professional must retain the completed Form 8454T and use a code on the taxpayer's return to indicate how the taxpayer elected to opt out.

**North Carolina and/or Maryland Out of State Tax Credit:** Tax credits for taxes paid to North Carolina and Maryland may be included on an e-filed return. However, hard copies of the North Carolina and/or Maryland state return must be mailed to:

Virginia Department of Taxation PO Box 27423 Richmond, VA 23261-7423

FAILURE TO SUBMIT HARD COPIES OF THE MARYLAND AND/OR NORTH CAROLINA STATE TAX RETURN IMMEDIATELY AFTER RECEIVING AN ACKNOWLEDGEMENT OF ACCEPTANCE FOR AN E-FILED RETURN MAY DELAY THE PROCESSING OF THE RETURN.

**NOTE:** Returns containing the out of state tax credit for states other than North Carolina or Maryland may not be filed electronically.

**Extension for Filing Income Tax Returns:** Taxpayers are granted an automatic six-month extension for filing an income tax return. No application for extension is required; however, any tentative tax due must be paid with a special extension voucher, *Form 760IP*, by the original due date for filing the return (May 1, 2009 for calendar year filers). The penalty for underpayment of tentative tax is 2% per month.

<u>Deceased taxpayer:</u> In the case of a deceased taxpayer, if someone other than the surviving spouse is to receive the refund, a federal Form 1310 must be included as a part of the electronically filed tax return.

#### **COMMON REJECT CODES**

## AVOID REJECTS CHECK FOR THESE ERRORS BEFORE TRANSMITTING

- **Missing Checking or Savings Account Indicator:** The checking or savings account indicator is missing. Verify that checking or savings is indicated before transmitting.
- Withholding Forms must have VA in the state field if VA withholding claimed: The state abbreviation is missing on Form W-2, W-2G, 1099-MISC, or 1099-R. If Virginia withholding is being claimed on the return, the state abbreviation must be VA on Form W-2, W-2G, 1099-MISC or 1099-R.
- 070 <u>VA Withholding on Form W-2 cannot exceed 25% of Wages or Gross Distributions:</u> Often the State Wages or State Distribution amount was not entered in the software. Verify the wages are correct.
- 071 <u>VA Withholding on Form 1099-R cannot exceed 25% of Wages or Gross Distributions:</u>
  Often the State Wages or State Distribution amount was not entered in the software. Verify the distribution is correct.
- 072 <u>VA Withholding on Form W-2G cannot exceed 25% of Wages or Gross Distributions:</u> Often the State Wages or State Distribution amount was not entered in the software. Verify the wages are correct.
- **Direct Debit Date cannot be older than submit date:** Direct debit must be scheduled to occur on the date or any date after the date of transmission.
- Out of State Tax Credit must be for North Carolina or Maryland: Tax credit received for states other than North Carolina or Maryland will be rejected. Returns containing tax credits for states other than North Carolina or Maryland must be filed on paper.
- 004 <u>Invalid Negative Values:</u> Certain items on the Virginia return may not be negative. For example, personal exemptions and Dependent Care Expenses may not be negative. Please verify all line items on the return before transmitting electronically.
- **State Abbreviation must be valid for Out of State Tax Credit:** The state abbreviation on Schedule OSC or Schedule NPY must be NC or MD for out of state tax credit.
- 100 <u>Incomplete Direct Debit Information:</u> You must provide the direct debit date, direct debit amount, bank routing and transit number, bank account number, and indicate whether the account is checking or savings for direct debit of the tax liability to Virginia. This debit information may be different from debit information entered for the federal return.

#### SEE APPENDIX B FOR A COMPLETE LIST OF REJECT CODES

#### FEDERAL/STATE ELECTRONIC FILING PROCESS

EROs and transmitters accepted into the Fed/State Electronic Filing Program may file both the federal return and the state return in one transmission to the Internal Revenue Service. Virginia also participates in the IRS State Only Program where returns may be transmitted separately from the federal return. The IRS acts as a conduit through which VATAX will retrieve the state data for processing. The returns will then be processed through the VATAX computer system.

All rules, regulations, and requirements governing tax professionals, transmitters, and EROs as stated in the *IRS Publication 1345*, *Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns (Tax Year 2008)* are also in effect for VATAX. It is recommended that *IRS Publication 1345* be reviewed in conjunction with 2008 *Publication VA-1345*.

<u>Acceptance Process</u>: Registration with VATAX is not required. EROs/Transmitters are automatically accepted into VATAX's e-file program if registered with the Internal Revenue Service to participate as an ERO or transmitter.

<u>Transmitting Returns</u>: The VATAX return data must be transmitted to the IRS Andover Service Center in accordance with IRS procedures. It is imperative to understand the functionality of a software package to ensure that the state return is attached to the federal return when it is transmitted. If the software package offers State Only Filing, state returns may be transmitted separate from the federal return.

When the IRS has provided an acknowledgement of acceptance to the ERO/Transmitter, the state return data will be made available to VATAX for retrieval within 24 hours of the federal acknowledgment. If the federal and state return is transmitted together and the federal return data is rejected, the state return will not be made available to the department. Once corrections have been made, both returns should be retransmitted in one transmission unless your software supports State Only Filing where they may be retransmitted separately. If only the state return is rejected, it may be retransmitted through the IRS State Only Filing program once corrected. Otherwise, the corrected return should be filed on paper.

<u>Acknowledgement of Returns:</u> Acknowledgements specify whether a Virginia return is accepted or rejected. The Virginia Acknowledgement is separate from the IRS Acknowledgement. After receiving the Virginia return from the IRS, VATAX will create an acknowledgement record and provide it to the IRS for retrieval by transmitters. The IRS is providing state acknowledgements on its Front End Processing System. Please refer to *IRS Publication VA-1346* for details.

#### **VIRGINIA RETURNS**

The Virginia return consists of data transmitted electronically to VATAX and supporting paper documents to be retained by the ERO/transmitter. The electronic portion of the return consists of the *Form 760CG*, *760PY*, *763*, and complete copy of the federal return. The non-electronic portion of the Virginia return (to be retained by ERO for a minimum of three years from the due date of the return or file date, whichever is later) consists of the signature form, *Form VA-8453*, and the state copy of *Forms W-2s*, *W-2G*, *1099-R*, *1099-MISC*, and *1099-G*. Substitute W-2 forms (*Form 4852*) and statements created on a personal computer are *NOT* acceptable. Virginia *Schedule INC* may be retained in place of wage statements. VATAX may request the non-electronic portion of the Virginia return for audit purposes.

<u>Acceptable Returns:</u> In addition to the returns accepted for federal electronic filing listed in the IRS <u>Publication 1345</u> for tax year 2008, the types of Virginia returns that can be transmitted electronically are as follows:

- Resident Return (Form 760CG)
- Amended Resident Return (Form 760CG)
- Part Year Resident Return (Form 760PY)
- Amended Part Year Resident Return (Form 760PY)

- Non-Resident Return (Form 763)
- Amended Non-Resident Return (Form 763)
- Returns containing extension payments
- Returns containing estimated payments
- Returns containing VA Schedules NPY, ADJ, FED, CR
- Returns containing VA Schedule OSC with credit for taxes paid to NC and/or MD only
- Decedent Returns, including joint returns filed by spouses

<u>Unacceptable Returns</u>: In addition to the returns excluded from federal electronic filing listed in Publication 1345 for Tax Year 2008, the following types of Virginia returns are also excluded:

- Prior year returns
- Returns with foreign addresses
- Fiduciary returns (Form 770)
- Returns for any tax period other than January 1, 2008 to December 31, 2008
- Returns containing "Other Subtractions" reported under code 99
- Returns containing withholding reported on Form 4852, Substitute W-2 or 1099-R
- Returns containing out of state tax credits for any state other than North Carolina or Maryland

<u>Form VA-8453</u>: Form VA-8453, is the state signature and authorization form. Unless the PIN option is utilized, Form VA-8453 must be completed and signed by all appropriate parties before the return is transmitted electronically. State copies of Forms W-2, W-2G, 1099-R, 1099-MISC, and 1099-G must be attached to Form VA-8453. Form 4852, substitute or computer-generated W2 copies are NOT acceptable. The Virginia Schedule INC may be attached in place of Forms W-2, W-2G, 1099-R, 1099-MISC, and 1099-G.

Upon receipt of the Virginia acknowledgement, enter the IRS Declaration Control Number (*DCN*) in the appropriate boxes at the top, left-hand portion of the form. The form should be filed by the DCN and maintained for a minimum of three years from the due date of the return, or the filing date, whichever is later. For self prepared returns, the taxpayer must retain the forms. For rejected returns, *Form VA-8453* becomes insignificant. VATAX may request these documents for audit purposes.

DO NOT mail this Form VA-8453 and/or its attachments to the department unless you are an ERO/transmitter and you close your business. If you are an ERO/transmitter and you close your business, you must mail Forms VA-8453 and attachments along with a letter of explanation to:

Virginia Department of Taxation P.O. Box 27423 Richmond, VA 23261-7423

**Corrections to Form VA-8453:** If the ERO changes the electronic return after *Form VA-8453* has been signed, and the Virginia Taxable Income changes by more than \$25 or the state refund changes by more than \$5, the ERO must have the taxpayer sign a corrected *Form VA-8453* before transmitting the return.

**Form VA-8879:** When choosing the Practitioner PIN method, both the taxpayer(s) and ERO must sign Form VA-8879. By signing this form, the taxpayer authorizes the ERO to enter the taxpayer's personal identification number on his or her e-filed income tax return. This form should be retained by the ERO for a minimum of three years from the due date of the return or the file date, whichever is later.

<u>Form VA-8454P:</u> Preparers who prepare more than 100 tax returns for the taxable year must file by electronic medium. Electronic medium DOES NOT include filing paper returns that include the 2D barcode. Preparers may request a hardship waiver by completing <u>Form VA-8454P</u> if he or she feels that the e-file requirement would cause an undue hardship.

**Form VA-8454T:** Although we encourage taxpayers that use tax preparers to request their return be filed electronically, taxpayers may opt out of the e-file requirement by completing *Form VA-8454T*, Virginia Department of Taxation Taxpayer Filing Election Opt Out Form. The preparer should retain Form VA-8454T for taxpayers who choose to opt out of e-file. The form may be found on the Virginia department of Taxation web site at the address http://www.tax.virginia.gov/web\_pdfs/8454T.pdf

#### NAME, ADDRESS AND BANK INFORMATION

*Name:* When entering taxpayer names:

- First Names must be alpha characters. The only special character allowed in first name fields is a hyphen. One space is permitted between alpha characters.
- Middle Names and Suffixes must be alpha characters. No space or numeric character is allowed.
- Last Names must be alpha characters. The only special characters allowed are hyphen and apostrophe. No spaces are allowed between alpha characters.

#### Address: When entering addresses:

- Follow IRS and USPS address standards
- Omit punctuation when not significant
- Include a hyphen in 9 digit Zip codes

**Bank Account Information:** If the taxpayer requests a direct deposit or direct debit, the following information must be entered correctly to avoid rejection of the transaction by the bank:

- Routing Transit Number
- Account Number
- Type of Account (checking or savings)
- Direct debit date for tax due returns
- Direct debit amount for tax due returns

Test Taxpayer	1234
100 Main Street	
Richmond, VA 23230	
	Date
PAY TO THE ORDER OF	
\$	Dollars
ANYTOWN BANK	
FOR	
:250250025   :2020 <u>2</u> 0    86   1234	
RTN =250250025 ACCOUNT NUMBER=20202086	

#### **REFUND RETURNS**

In most cases the taxpayer will receive refund checks within two weeks and direct deposits within 5 to 7 days of the Department's acknowledgment. Taxpayers should be advised to wait four weeks, however, from the date of transmission before calling VATAX to inquire about the status of a refund check. Taxpayers may inquire about the status of their refund by visiting <a href="www.tax.virginia.gov">www.tax.virginia.gov</a> or calling Teletax at 804-367-2486.

Before issuing any refunds, we are required to check for any outstanding debt with agencies of the Commonwealth of Virginia, Virginia local governments, the Virginia courts system, and the IRS. If any such debt is found, all or part of the refund may be withheld to help satisfy the debt and processing of the return will be delayed. The taxpayer will be notified in writing if refunds are withheld.

<u>Direct Deposit:</u> Internal Revenue Service Publication 1345 sets forth detailed eligibility requirements, responsibilities, and instructions governing tax professionals, transmitters, and EROs who offer taxpayers the option of Direct Deposit. Those same rules, policies and procedures apply when offering Direct Deposit on the state return. If any of the following conditions exist, VATAX will issue a paper check:

- Outstanding debts with agencies of the Commonwealth of Virginia, Virginia local governments, the Virginia courts system or the IRS (if there is a refund balance remaining after the satisfaction of a debt)
- Rejection by the receiving depository financial institution

Some financial institutions do not permit the direct deposit of a joint refund into an individual account and/or accept direct deposits into an account that is payable through another bank or financial institution, including credit unions. VATAX is not responsible when a financial institution does not accept a direct deposit for this reason.

Taxpayers should contact their bank and check their account statements before calling VATAX to inquire about the status of a refund. Most direct deposit traces conducted by VATAX show funds being properly credited to the taxpayer's account.

**NOTE**: The accounts and financial institution into which the Virginia refund and the Internal Revenue Service refund are deposited may be different. Therefore, the state and federal routing and transit numbers (RTN) and deposit account numbers (DAN) may not be the same.

<u>Refund Anticipation Loans:</u> VATAX neither supports nor prohibits Refund Anticipation Loans (*RALs*). The agency and the State Treasurer's Office are not liable for any loss suffered by the taxpayer or the tax professional/transmitter/ERO as a result of VATAX's denial of a direct deposit request. The direct deposit will be denied if the taxpayer has outstanding debts with agencies of the Commonwealth of Virginia, Virginia local governments, the Virginia courts system, or the IRS.

**NOTE:** VATAX is not able to provide specific details regarding RALs. If your clients call VATAX, they will be referred to their tax preparer.

#### **BALANCE DUE RETURNS**

<u>E-File Direct Debit:</u> Taxpayers may pay the balance due at the time of e-file by using direct debit. To make these electronic payments, the bank routing transit number, account number, type of account (*checking or savings*), direct debit amount, and direct debit date will need to be entered as part of the return record.

<u>Web Payments:</u> Use VATAX's website, <u>www.tax.virginia.gov</u>, to make online payments for previously filed returns or bills.

<u>Credit Cards:</u> Call 1-800-2PAY-TAX or visit <u>www.officialpayments.com</u> to pay by credit card. The jurisdiction code for VATAX is 1080. The company processing the transaction, Official Payments Corporation, assesses a fee. Prior to payment, the user is advised of the fee and has the option to cancel the transaction at that time with no charge.

<u>Form 760-PMT and Check:</u> Use Form 760-PMT to make payment by check for an electronically filed tax return. Vouchers do not have to be mailed at the same time the electronic return is filed. However, taxpayers should be made aware that payments for a tax due should be postmarked by May 1. The payment and voucher should be mailed to:

Virginia Department of Taxation PO Box 1478 Richmond, VA 23218-1478

**NOTE**: Taxpayers should not attach Form 760-PMT to a paper copy of the electronically filed return when mailing in their payment. This causes processing discrepancies and the payment will not be processed correctly.

<u>Assessments:</u> Returns filed or payments made after the due date will be subject to applicable penalties and interest. Any tax due return that is adjusted by VATAX will receive a Notice of Assessment once the return is processed. In some cases, an assessment will be generated before a payment is posted. If the taxpayer has sent in the payment for a portion of the amount due, the balance of the assessment should be paid within 30 days.

#### **RESPONSIBILITIES OF TAX PROFESSIONALS**

Tax professionals, transmitters, and EROs must maintain a high degree of integrity, compliance, and accuracy to remain in the Federal/State Electronic Filing Program. They must also follow the terms set forth in this handbook and adhere to the requirements below. Persons or firms not meeting these requirements are subject to suspension from the program by VATAX.

<u>Accuracy:</u> It is important to verify the accuracy of the name, address, and Social Security Number for all taxpayers. Inaccurate information may delay the processing of the return.

<u>Compliance:</u> All electronic filers must comply with the requirements and specifications set forth in *IRS Publications 1345, 1346, 1436* and VATAX *Publications VA-1345, VA-1346* and *VA-1436*.

<u>Timeliness of Filing:</u> Transmitters must ensure that electronic returns are filed in a timely manner. The date of electronic transmission to the Internal Revenue Service will be considered the filing date for a Virginia return received electronically.

<u>Deadline for Filing:</u> VATAX will accept electronically filed individual income tax returns that have been submitted for transmission to the IRS Andover Service Center through October 15, 2009 (subject to IRS change). Any Virginia return submitted after this date must be filed on paper.

#### Refund returns that must be filed as paper documents may be mailed directly to:

Virginia Department of Taxation PO Box 1498 Richmond, VA 23218-1498

#### Tax due returns that must be filed as a paper document may be mailed directly to:

Virginia Department of Taxation PO Box 760 Richmond, VA 23218-0760.

<u>Changes to the Return:</u> If the transmitter or taxpayer wishes to make any changes after the electronically filed return has been accepted, the taxpayer must file an amended return. The amended return may be filed electronically or through the paper document filing process.

<u>Responsibility to Clients:</u> Tax professionals have the important task of filing a client's tax return, and they must ensure that the return arrives at VATAX. If the electronic state return fails to arrive at its destination or the return is rejected, tax professionals should retransmit the return electronically or advise their clients to file a paper return.

<u>Acknowledgements:</u> The Internal Revenue Service will provide sate acknowledgements on its Front End Processing System. Please refer to IRS *Publication 1346* for further details.

Individual income tax returns are either accepted or rejected for specific reasons. Accepted returns meet the processing criteria and are considered "filed". Rejected returns fail to meet processing criteria and are considered "not filed". The acknowledgment identifies the source of the problem using a system of error reject codes. To help identify the cause of rejection, the error reject codes and explanations have been included in the Appendix of this publication. Rejected returns may be retransmitted after corrections are made, provided the software package being used supports State Only Filing. Otherwise, a paper return must be filed. Qualified taxpayers may opt to file on-line (www.tax.virginia.gov) through iFile.

Transmitters should notify their EROs of the return's acceptance within five (5) working days after obtaining the state acknowledgement. Any correspondence from the department regarding errors made on an electronically filed return will be directed to the taxpayer. Taxpayers and tax professionals should respond to the telephone numbers and addresses as directed in the correspondence.

#### **E-FILE CHECKLIST**

- > Double check to make sure the Virginia Forms and attachments are eligible for electronic filing.
- Sign Form VA-8453 only if the Self Select PIN or Practitioner PIN option is not used. This form should be retained by the ERO (or taxpayer, if self prepared) for a minimum of three years from the due date of the return or the file date, whichever is later.
- > Make sure the Name(s) and Social Security Number(s) are correct on Form VA-8453.
- Form VA-8879 must be completed when an individual e-file return is being signed using the Practitioner PIN method. Both the taxpayer(s) and ERO must sign Form VA-8879. The form should be retained by the ERO for a minimum of three years from the due date of the return or the file date, whichever is later.
- > Use only whole dollar amounts.
- ➤ Make sure direct deposit/direct debit information for the state is specified if the taxpayer(s) chooses this as the method for receiving their state refund or paying their tax due.
- Attach all state copies of *Forms W-2, 1099-R, 1099-MISC, 1099-G*, and *W-2G* or *Schedule INC* to the original signature form, *VA-8453* or *VA-8879*, and retain for a minimum of three years. Do not mail forms to VATAX.
- ➤ VATAX participates in the Federal/State e-file program as a piggyback state. Electronically transmit the federal and state data at the same time unless the software package supports State Only Filing where the federal and state return may be transmitted separately.
- > Retrieve the IRS acknowledgement.
- > Retrieve the state acknowledgement.
- > Provide copies of the electronic return to taxpayer(s) after receiving an acknowledgement of acceptance from VATAX.
- ➤ If a tax credit for another state is claimed (MD and NC only), mail copies of the other state return(s) to the following address:

Virginia Department of Taxation P.O. Box 27423 Richmond, VA 23261-7423

➤ ERO/transmitter that close their business should mail *Forms VA-8453* and attachments, along with a letter of explanation, to the following address:

Virginia Department of Taxation P.O. Box 27423 Richmond, VA 23261-7423

If the IRS has accepted the federal return and the state return has been rejected, the corrected Virginia return may be retransmitted provided the software package supports State Only Filing. Otherwise, a paper return must be submitted. Taxpayers may also opt to file returns via the Internet using the department's *iFile* program

➤ Tax due payments may be paid by direct debit, credit card through www.officialpayments.com, web payments through www.tax.virginia.gov, or by mailing a check accompanied by *Form 760-PMT*, Payment Voucher, to the following address:

Virginia Department of Taxation PO Box 1478 Richmond, VA 23218-1478

If warehousing a payment the direct debit date must not be after the original due date of the return.

**NOTE**: Do not submit a paper copy of the electronically filed return with Form 760PMT. This may causes processing discrepancies and the payment will not be posted correctly.

### **APPENDIX A - LOCALITY CODES**

### **COUNTY CODES**

COUNTY	CODE	COUNTY	CODE	COUNTY	CODE
ACCOMACK	001	FRANKLIN	067	NOTTOWAY	135
ALBEMARLE	003	FREDERICK	069	ORANGE	137
ALLEGHANY	005	GILES	071	PAGE	139
AMELIA	007	GLOUCESTER	073	PATRICK	141
AMHERST	009	GOOCHLAND	075	PITTSYLVANIA	143
APPOMATTOX	011	GRAYSON	077	POWHATAN	145
ARLINGTON	013	GREENE	079	PRINCE EDWARD	147
AUGUSTA	015	GREENSVILLE	081	PRINCE GEORGE	149
BATH	017	HALIFAX	083	PRINCE WILLIAM	153
BEDFORD	019	HANOVER	085	PULASKI	155
BLAND	021	HENRICO	087	RAPPAHANNOCK	157
BOTETOURT	023	HENRY	089	RICHMOND	159
BRUNSWICK	025	HIGHLAND	091	ROANOKE	161
BUCHANAN	027	ISLE OF WIGHT	093	ROCKBRIDGE	163
BUCKINGHAM	029	JAMES CITY	095	ROCKINGHAM	165
CAMPBELL	031	KING AND QUEEN	097	RUSSELL	167
CAROLINE	033	KING GEORGE	099	SCOTT	169
CARROLL	035	KING WILLIAM	101	SHENANDOAH	171
CHARLES CITY	036	LANCASTER	103	SMYTH	173
CHARLOTTE	037	LEE	105	SOUTHAMPTON	175
CHESTERFIELD	041	LOUDOUN	107	SPOTSYLVANIA	177
CLARKE	043	LOUISA	109	STAFFORD	179
CRAIG	045	LUNENBURG	111	SURRY	181
CULPEPER	047	MADISON	113	SUSSEX	183
CUMBERLAND	049	MATHEWS	115	TAZEWELL	185
DICKENSON	051	MECKLENBURG	117	WARREN	187
DINWIDDIE	053	MIDDLESEX	119	WASHINGTON	191
ESSEX	057	MONTGOMERY	121	WESTMORELAND	193
FAIRFAX	059	NELSON	125	WISE	195
FAUQUIER	061	NEW KENT	127	WYTHE	197
FLOYD	063	NORTHAMPTON	131	YORK	199
FLUVANNA	065	NORTHUMBERLAND	133	UNASSIGNED	300

### **CITY CODES**

		J J.J.			
CITY	CODE	CITY	CODE	CITY	CODE
ALEXANDRIA	510	FREDERICKSBURG	630	PETERSBURG	730
BEDFORD	515	GALAX	640	POQUOSON	735
BRISTOL	520	HAMPTON	650	PORTSMOUTH	740
BUENA VISTA	530	HARRISONBURG	660	RADFORD	750
CHARLOTTESVILLE	540	HOPEWELL	670	RICHMOND	760
CHESAPEAKE	550	LEXINGTON	678	ROANOKE	770
COLONIAL HEIGHTS	570	LYNCHBURG	680	SALEM	775
COVINGTON	580	MANASSAS	683	STAUNTON	790
DANVILLE	590	MANASSAS PARK	685	SUFFOLK	800
EMPORIA	595	MARTINSVILLE	690	VIRGINIA BEACH	810
FAIRFAX	600	NEWPORT NEWS	700	WAYNESBORO	820
FALLS CHURCH	610	NORFOLK	710	WILLIAMSBURG	830
FRANKLIN	620	NORTON	720	WINCHESTER	840

#### APPENDIX B - ERROR REJECT CODES AND EXPLANATIONS

# For Individual Income Tax Returns For Tax Period *January 1, 2008 to December 31, 2008*

See Appendix C for help in identifying field numbers. \* indicates a change from tax year 2007.

- When significant, Taxpayer PIN must be 5 numeric digits in length.
- When significant, Spouse PIN must be 5 numeric digits in length.
- When significant, ERO PIN must be 11 numeric digits in length.
- Money amount fields must contain whole dollars (no cents).
- When a field is designated as Alphanumeric (positive only), the field must be present and must contain an amount greater than or equal to zero.
- When transmitting in fixed or variable format, significant date fields must contain numeric characters in the following formats, unless otherwise specified:
- > Foreign addresses are not acceptable
- Year fields with a length of four positions = YYYY
- Date fields with six positions = MMYYYYY
- Date fields with eight positions = MMDDYYYY
- All alphanumeric fields must be left justified (and blank-filled when transmitting in fixed format) unless otherwise specified.
- The allowable characters for alphanumeric fields are: A-Z, 0-9, space, % (percent), , (comma), (period), (hyphen or minus sign), < (less than sign), () (parentheses), and : (colon).
- The allowable characters for numeric fields are:
  The numbers 0-9 and (hyphen or minus sign)
- **Your** VAGI, Form 760CG, line 16a (Field 430) and Spouse's VAGI, Form 760CG, line 16b (Field 435 must equal Total VAGI, Form 760CG, line 9 (Field 320-2).
- **006** Primary SSN (Field 003) is a required field.
- \*007 Primary SSN (Field 003) or Secondary SSN (Field 055) cannot duplicate Primary SSN (Field 003) or Secondary SSN (Field 055) of any previously accepted electronic return for the current tax year, unless it is an amended return (Field 315-10=X).
- **008** Maximum Field Length Exceeded
- **009** ➤ Duplicate Field Number
- **010** > Invalid Field Number
- 011 ➤ NOT USED
- **012** ► Invalid Field Sequence
- 013 > Either Checking Account (Field 040) or Savings Account (Field 048) must be indicated when Bank Routing Number (Field 030) and Bank Account Number (Field 035) are present.
- 014 > Primary SSN (Field 003) and Secondary SSN (Field 055) cannot duplicate each other.

Depositor Account Number (Field 035) must be alphanumeric (i.e., only alpha characters, numeric characters, and hyphens), must be left-justified with trailing blanks if less than 17 positions, and cannot equal all zeros.

#### 016 > Form 760PY

The dates of residency for the Primary Taxpayer (Fields 310-1 and 310-2), for Filing Status 1 and 3 or for the Primary Taxpayer (Fields 310-1 and 310-2) and Secondary Taxpayer (Fields 310-3 and 310-4), for Filing Status 2 and 4 must be in the date format MMDDYYYY.

#### 017 > Form 760CG

- If the Primary Taxpayer is claiming an Age Deduction (Field 315-3, Line 4a), the Primary Taxpayer DOB (Field 0093, page 2) must be in the date format MMDDYY.
- If the Secondary Taxpayer is claiming an Age Deduction (Field 315-4, Line 4b), the Secondary Taxpayer DOB (Field 0095, page 2) must be in the date format MMDDYY.

#### > Form 760PY

- If the Primary Taxpayer is claiming an Age Deduction (Field 315-3, Line 38, Column B), the Primary Taxpayer DOB (Field 0050, Line 1, Schedule NPY) must be in the date format MMDDYYYY.
- If the Secondary Taxpayer is claiming an Age Deduction (Field 315-4, Line 38, Column A), the Secondary Taxpayer DOB (Field 0051, Line 1, Schedule NPY) must be in the date format MMDDYYYY.

#### Form 763

- If the Primary Taxpayer is claiming an Age Deduction (Field 315-3, Line 33b, Column B), the Primary Taxpayer DOB (Field 870, Line 33a, Column B) must be in the date format MMDDYYYY.
- If the Secondary Taxpayer is claiming an Age Deduction (Field 315-4, Line 33b, Column A), the Secondary Taxpayer DOB (Field 875, Line 33a, Column A) must be in the date format MMDDYYYY.

#### 018 ➤ NOT USED

#### 019 > Form 760CG

- Spouse's SSN (Field 055) is required if Filing Status (Field 305-3) equals: "2" or "3". Spouse SSN cannot equal all zeros.
- > Forms 760PY and 763
- Spouse's SSN (Field 055) is required if Filing Status (Field 305-3) equals: "2", "3" or "4". Spouse SSN cannot equal all zeros.

#### **020** > Form 760CG and 760PY

- > Total nonrefundable credits [Credit for Low Income (Field 475), Credit tax paid to another state (Field 480), and Credits from Schedule CR (Field 485)] cannot exceed Net Tax (Field 445).
- > Form 763
- > Total nonrefundable credits [Credit for Low Income (Field 475), Credit tax paid to another state (Field 480), and Credits from Schedule CR (Field 485)] cannot exceed Net Tax (Field 425).
- **O21** Subtractions (Form 760CG, Field 315-8, Line 7; Form 760PY, Field 315-8, Line 9, Column B and/or Field 320-3, Line 9, Column A; Form 763, Field 315-8, Line 9) must be numeric or blank.
- Primary Taxpayer First Name (Field 070-1) and Secondary Taxpayer First Name (Field 070-3) must be alpha. The only special character is a hyphen. One space is permitted between alpha characters. Primary Taxpayer Middle Name (Field 070-2) and Suffix (Field 060-3) and Secondary Taxpayer Middle Name (Field 070-4) and Suffix (Field 065-3) must be alpha. No space or numeric is allowed. When significant, Primary Taxpayer Last Name (Field 060-1) and Secondary Taxpayer Last Name (Field 065-1) must be alpha. The only special characters allowed are hyphen and apostrophe. No spaces are allowed between alpha characters.

#### \*023 > Form 760CG

Credit for Low Income (Form 760CG, Field 475, Line 21) must equal Credit amount (Schedule ADJ/CG Part 2, Field 0111, Line 17).

#### > Form 760PY and 763

Credit for Low Income (Form 760PY, Field 475, Line 18e; Form 763, Field 475, Line 19e) must equal Credit amount (Schedule NPY Part III, Field 0077, Line 10).

#### 024 > Form 760CG, 760PY, and 763

- Subtotal (Form 760CG, Field 315-1, Line 3; Form 760PY, Field 315-1, Line 8, Column B; Form 763, Field 315-1, Line 8) must equal Federal Adjusted Gross Income (Form 760CG, Field 310-5, Line 1; Form 760PY, Field 310-5, Line 6, Column B; Form 763, Field 310-5, Line 6) plus Additions (Form 760CG, Field 310-7, Line 2; Form 760PY, Field 310-7, Line 7, Column B; Form 763, Field 310-7, Line 7).
- Form 760PY, filing status 4
- Subtotal (Form 760PY, Field 315-2, Line 8, Column A) must equal Federal Adjusted Gross Income (Form 760PY, Field 310-6, Line 6, Column A) plus Additions (Form 760PY, Field 310-8, Line 7, Column A).

#### **025** *▶ NOT USED*

#### 026 > Form 760CG

- > Total Additions, (Field 0059, Line 3, page 2) must equal Additions (Field 310-7, Line 2, page 1).
- > Form 760PY and 763
- Total Additions (Form 760PY, Field 565, Line 36, Column B, page 2; Form 763, Field 565, Line 32, page 2) must equal Additions (Form 760PY, Field 310-7, Line 7, Column B, page 1; Form 763, Field 310-7, Line 7, page 1).
- Form 760PY, filing status 4
- Total Additions (Form 760PY, Field 570, Line 36, Column A, page 2) must equal Additions (Form 760PY, Field 310-8, Line 7, Column A, page 1).

#### 027 > Form 760CG

- Total Deductions (Field 0104, Line 9, page 2) must equal Deductions (Field 385, Line 12, page 1).
- > Form 760PY and 763
- Total Deductions (Schedule NPY, Field 0153, Column B, Line 2) must equal Deductions (Form 760PY, Field 385, Line 13, Column B, page 1; Form 763, Field 385, Line 13, page 1).
- Form 760PY, filing status 4
- Total Deductions (Schedule NPY, Field 0154, Column A, Line 2) must equal Deductions (Form 760PY, Field 390, Line 13, Column A, page 1).
- 028 > ERO PIN (Field 126) may not be significant if return type is on-line (Filed 049=0).
- \*029 Faxpayer Prior Year FAGI (Field 330-1) or Spouse Prior Year FAGI (Field 330-2) must be valid if IRS PIN (IRS authentication record Field 035) or ERO PIN (Field 126) is not valid, unless it is an amended return (Field 315-10=X) and/or the return has been prepared by a paid tax preparer (Field 305-32=X).
- \*030 > Taxpayer Prior Year FAGI (Field 330-1) or Spouse Prior Year FAGI (Field 330-2) must be valid if return is a state only return (Field 019=SO) and ERO PIN (Field 126) is not significant, unless it is an amended return (Field 315-10=X) and/or the return has been prepared by a paid tax preparer (Field 305-32=X).

#### \*031 > Form 760CG, page 2

If Other subtractions amount (Fields 064, 066, and 068) is greater than zero, then corresponding code (Fields 063, 065, and 067) must be valid.

- 032 > NOT USED
- \*034 > Warehouse of direct debit is not available for returns filed after May 1. If a return is transmitted after May 1, the direct debit date (Field 027) must equal the transmission date (Field 023-3).
- 035 > NOT USED
- **036** ➤ NOT USED
- **037** ➤ NOT USED
- **038** Invalid Software Developer Code (Field 300-1).
- **039** ► Federal Data Flag (Field 305-1) must equal "V".
- 040 > Virginia Form Code (Field 305-2) is a required field and must equal "L", "P" or "N".
- 041 *→ Form 760CG* 
  - Filing Status (Field 305-3) is a required field and must equal: "1", "2" or "3".
  - Forms 760PY and 763
  - Filing Status (Field 305-3) is a required field and must equal: "1", "2", "3" or "4".
- 042 > Form 760PY
  - When Filing Status (Field 305-3) equals "1", "2" or "3", Column A\* of Form 760PY should not be greater than zero. Field numbers for column A are: 0051, 0053, 0055, 0057, 0059, 0061, 310-6, 310-8, 315-2, 315-4, 320-3, 320-4, 355, 365, 380, 390, 400, 410, 535, 550, 560, 570, 575, 585, 590, 600, 605, 615, 625, 635, 645, 655, 665, 675, 755, 760, 765, 770, 775, 780, 785, 825, 830, 835, 840, 845, 850, 855, 895, 900, 905, 910, 915, 920, and 925.
- **043** Find the equals "1". Head of Household box (Field 305-4) should only be significant if Filing Status (Field 305-3) equals "1".
- When Head of Household box (Field 305-4) is significant and Filing Status (Field 305-3) equals "1", secondary SSN (Field 055) must not be significant.
- **045** ➤ NOT USED
- **046** ➤ *NOT USED*
- **047** ➤ NOT USED
- **048** ➤ NOT USED
- **049** ➤ NOT USED
- **050** ➤ *NOT USED*
- **051** *▶ NOT USED*
- 052 > Form 763
  - Subtractions (Field 315-8) on Line 9 of Page 1 of tax form must equal Total Subtractions (Field 670) on Line 40 of page 2 of tax form.
  - > Form 760PY
  - Line 9, column B (Field 315-8) must equal line 45, column B (Field 670); Line 9, column A (Field 320-3) must equal line 45, column A (Field 675).
- **053** ► NOT USED

#### **054** > Form 760CG, Line 10 and Form 763, Line 44

- The Virginia Itemized Deductions (Field 370) must be the difference between Total Federal Itemized Deductions (Field 320-5) and State and Local Income Taxes (Field 320-6).
- > Form 760PY, Line 47c
- The Allowable Virginia Itemized Deductions (Field 715) must be the difference between Total Federal Itemized Deductions paid while a Virginia Resident (Field 705) and State and Local Income Taxes paid while a Virginia Resident (Field 710)

#### **055** > Form 760PY, Line 11b

The Itemized Deductions in Column A (Field 365, Line 11 b) plus Column B (Field 360, Line 11b) must equal Virginia Itemized Deductions (Field 715, Line 47c).

#### **056** > Form 760CG, Line 10

- If Itemized Deductions (Field 320-5) are not claimed and taxpayer is not claimed as a dependent on another's return (Field 305-15), the Standard Deduction (Field 370) must equal:
- \$3,000 if filing status (Field 305-3) equals "1"
- \$6,000 if filing status (Field 305-3) equals "2"
- \$3,000 if filing status (Field 305-3) equals "3"
- > Form 760PY, Line 46d
- If Itemized Deductions (Field 360 and/or Field 365) are not claimed and taxpayer is not claimed as a dependent on another's return (Field 305-15), the Standard Deduction (Field 695) must equal:
- > \$3,000 if filing status (Field 305-3) equals "1"
- \$6,000 if filing status (Field 305-3) equals "2" or "4"
- \$3,000 if filing status (Field 305-3) equals "3"
- > Form 763, Line 41
- If Itemized Deductions (Field 370) are not claimed and taxpayer is not claimed as a dependent on another's return (Field 305-15), the Standard Deduction (Field 880) must equal:
- > \$3,000 if filing status (Field 305-3) equals "1"
- \$6,000 if filing status (Field 305-3) equals "2"
- \$3,000 if filing status (Field 305-3) equals "3" or "4"

#### **057** *▶ NOT USED*

**058** ➤ NOT USED

#### \*059 > Form 760CG, Line 14

- Virginia Taxable Income (Field 405) must be the difference between Virginia Adjusted Gross Income (Field 320-2) and Subtotal (Field 395) unless the filing threshold is met. If the filing threshold is met, Virginia Taxable Income (Field 405) may be zero, negative, or blank. The filing thresholds are met if:
- Filing Status = 1 and Virginia Adjusted Gross Income is less than \$11,250.
- Filing Status = 2 and Virginia Adjusted Gross Income is less than \$22,500.
- Filing Status = 3 and Virginia Adjusted Gross Income is less than \$11,250.
- Form 760PY, Line 15 Column B
- Virginia Taxable Income (Field 405) must be the difference between Virginia Adjusted Gross Income (Field 320-2) and Subtotal (Field 395) unless the filing threshold is met. If the filing threshold is met, Virginia Taxable Income (Field 405) may be zero, negative, or blank. The filing thresholds are met if:
- Filing Status = 1 and Virginia Adjusted Gross Income is less than \$11,250.
- Filing Status = 2 or 4 and Virginia Adjusted Gross Income in column A plus column B is less than \$22,500.
- Filing Status = 3 and Virginia Adjusted Gross Income is less than \$11,250.
- Form 760PY, Line 15 Column A
- Virginia Taxable Income (Field 410) must be the difference between Virginia Adjusted Gross Income (Field 320-4) and Subtotal (Field 400) unless the filing threshold is met. If the filing

- threshold is met, Virginia Taxable Income (Field 410) may be zero, negative, or blank. The filing thresholds are met if:
- Filing Status = 1 and Virginia Adjusted Gross Income is less than \$11,250.
- Filing Status = 2 or 4 and Virginia Adjusted Gross Income in column A plus column B is less than \$22,500.
- Filing Status = 3 and Virginia Adjusted Gross Income is less than \$11,250.
- Form 763, Line 15
- Virginia Taxable Income (Field 405) must be the difference between Virginia Adjusted Gross Income (Field 320-2) and Subtotal (Field 395) unless the filing threshold is met. If the filing threshold is met, Virginia Taxable Income (Field 405) may be zero, negative, or blank. The filing thresholds are met if:
- Filing Status = 1 and Virginia Adjusted Gross Income is less than \$11,250.
- Filing Status = 2 and Virginia Adjusted Gross Income is less than \$22,500.
- Filing Status = 3 or 4 and Virginia Adjusted Gross Income is less than \$11,250.

#### **060** > Form 760CG, Line 15

- Tax (Field 425) must equal Taxable Income (Field 405) multiplied by the appropriate tax rate.
- Form 760PY, Line 16
- Form Tax (Field 425, column B) must equal Taxable Income (Field 405, column B) multiplied by the appropriate tax rate.
- Tax (Field 585, column A) must equal Taxable Income (Field 410, column A) multiplied by the appropriate tax rate.
- Form 763, Line 18
- Tax (Field 425) must equal Nonresident Taxable Income (Field 420) multiplied by the appropriate tax rate.
- **061** ➤ NOT USED
- **062** ➤ NOT USED
- **063** *▶ NOT USED*

#### **064** > Form 760CG. Line 26

If Overpayment Amount (Field 500, line 26) is significant and Adjustments/Contributions (Field 515, line 28) is greater than Overpayment Amount, then Amount You Owe (Field 525) must be greater than zero.

#### **065** > Form 760PY. Line 24

- Form 763, Line 25
- If Contributions and Consumer's Use Tax (Field 515) are significant, Schedule NPY must be present.

#### **066** ➤ NOT USED

#### 067 *→ Form 760CG*

If Total Payments and Credits (Field 490) are greater than Net Tax (Field 445), and the Amount to Credit to Next Year's Tax (Field 510), plus Adjustments and Contributions (Field 515) are equal to Overpayment Amount (Field 500), the Refund (Field 530) cannot be greater than zero.

#### Form 760PY

If Total Payments and Credits (Field 490) are greater than Total Tax (Field 445), and the total of Amount to Credit to Estimated Income Tax (Field 510 and 535), plus Contributions and Consumer's Use Tax (Field 515) are equal to Overpayment Amount (Field 500), the Refund (Field 530) cannot be greater than zero.

#### > Form 763

➢ If Total Payments and Credits (Field 490) are greater than Income Tax (Field 425), and the total of Amount to Credit to Estimated Income Tax (Field 510), plus Contributions from Schedule NPY (Field 515) are equal to Overpayment Amount (Field 500), the Refund (Field 530) cannot be greater than zero.

#### 068 *➤ Form 760CG*

- If Total Payments and Credits (Field 490) are greater than Net Tax (Field 445), and the total of Applied to Estimated Tax (Field 510), plus Adjustments (Field 515) is less than Overpaid (Field 500), then Refund (Field 530) must be greater than zero.
- > Form 760PY, Line 27
- If Total Payments and Credits (Field 490) are greater than Total Tax (Field 445), and the total of Applied to Estimated Tax (Field 510 and 535), plus Contributions and Consumer's Use Tax (Field 515) is less than Overpaid (Field 500), then Refund (Field 530) must be greater than zero.
- Form 763, Line 28
  If Total Payments and Credits (Field 490) are greater than Total Tax (Field 425), and the total of Applied to Estimated Tax (Field 510), plus Contributions and Consumer's Use Tax (Field 515) is less than Overpaid (Field 500), then Refund (Field 530) must be greater than zero.

#### 069 > Form 760CG

- If Total Payments and Credits (Field 490) equal Net Tax (Field 445), then the following fields cannot be greater than zero: Tax You Owe (Field 495), Overpayment Amount (Field 500), Amount to credit to next year's tax (Field 510) or Refund (Field 530).
- > Form 760PY
- If Total Payments and Credits (Field 490) equals Total Tax (Field 445), then the following fields cannot be greater than zero: Income Tax You Owe (Field 495), Overpayment Amount (Field 500), Amount to credit to next year's tax (Field 510 and 535) or Refund (Field 530).
- > Form 763
- If Total Payments and Credits (Field 490) equals Total Tax (Field 425), then the following fields cannot be greater than zero: Income Tax You Owe (Field 495), Overpayment Amount (Field 500), Amount to credit to next year's tax (Field 510) or Refund (Field 530).
- **070** For each occurrence of Form W-2, Virginia State Withholding (Fields 400, 470, 520, or 570) cannot be greater than 25% of Wages (Fields 390, 460, 510, or 560).
- **071** For each occurrence of Form 1099-R, Virginia State Withholding (Field 240 or 280) cannot be greater than 25% of Gross Distribution (Field 110).
- **072** For each occurrence of Form W-2G, Virginia State Withholding (Field 210) cannot be greater than 25% of Gross Distribution (Field 40).
- **073** > Form 760CG, Line 25
  - Form PY. Line 20 and Line 26
  - If Total Payments and Credits (Field 490) are less than Total Tax (Field 445), then Income Tax You Owe (Field 495) and Amount you Owe (Field 525) must be significant.
  - Form 763, Line 21 and Line 27
  - If Total Payments and Credits (Field 490) are less than Total Tax (Field 425), then Income Tax You Owe (Field 495) and Amount you Owe (Field 525) must be significant.
- **074** For each occurrence of Form 1099-MISC, Virginia State Withholding (Field 079 or 083) cannot be greater than 25% of State Income (Field 082 or 086).
- **075** Administrative reject. Contact the VATAX Electronic Filing Help Desk at 804/367-6100 or <a href="mailto:elfcoordinator@tax.virginia.gov">elfcoordinator@tax.virginia.gov</a>.
- 076 > NOT USED
- **077** ➤ NOT USED
- **078** *▶ NOT USED*
- **079** ➤ *NOT USED*

#### > Form 760CG, Line 7

Total Other Subtractions (Field 315-8) on 760CG, page 1, line 7 and Total Subtractions (Field 0069) on 760CG, page 2, line 7 must equal the sum of Income from obligations or securities of the US (Field 0060) on 760CG, page 2, line 4, plus Disability Income (Field 0061) on 760CG, page 2, line 5, Fixed Date Conformity (Field 0062) on 760CG, page 2, Line 6a, plus all Other Subtractions (Fields 0064, 0066, and 0068) on 760CG, page 2 lines 6b through 6d.

#### > Form 760CG, Line 9

Virginia Adjusted Gross Income (Field 320-2) must equal the difference between Line 3 Subtotal (Field 315-1) and Line 8 Subtotal (Field 320-1).

#### > Form 760CG, Line 16

> Spouse Tax Adjustment (Field 440) may not exceed \$259.

#### > Form 760CG. Line 16

Filing Status (Field 305-3) must equal 2 when the Spouse Tax Adjustment (Field 440) is greater than zero.

O84 > If Credit for tax paid to another state (Form 760CG, Field 480, Line 22) is greater than 0 and Credit (Schedule OSC, Field 0060, Line 10) is greater than 0, then state abbreviation for which tax credit is being taken (Schedule OSC, Field 0056, Line 6) must be valid. If Credit for tax paid to another state (Form 760CG, Field 480, Line 22) is greater than 0 and Credit (Schedule OSC, Field 0070, Line 20) is greater than 0, then state abbreviation for which tax credit is being taken (Schedule OSC, Field 0066, Line 16) must be valid. If Credit for tax paid to another state (Form 760PY, Field 480, Line 18f; Form 763, Field 480, Line 19f) is greater than 0 and Credit (Schedule NPY, Field 0096, Part IV, Line 8) is greater than 0, then state abbreviation for which tax credit is being taken (Schedule NPY, Field 0087, Line 3) must be valid.

Return Sequence Number (Field 023) must be numeric.

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086 ➤ NOT USED
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*▶ NOT USED* 

➤ NOT USED

➤ NOT USED

\*090 > Form 760CG, Line 18a plus Line 18b

- Form 760PY, Line 18a plus Line 18b
- Form 763, Line 19a plus Line 19b

Virginia Income Tax Withheld (Field 450 plus 455) must be equal to or less than State Income Tax from Form W-2 (Fields 0400+ 0470+0520+0570) and/or Form W-2G (Field 0210) and/or Form 1099-R (Field 0240 and 0280) and/or 1099-MISC (Fields 079 and 083) and/or VA Form VK-1(Field 064) when the State Name (W-2 Field 0370 and 0440 and 0490 and 0540, W-2G Field 0200, 1099-R Field 0246 and 0286, or 1099-MISC Field 080 and 084) equals VA.

➤ *NOT USED* 

➤ NOT USED

➤ NOT USED

➤ *NOT USED* 

➤ NOT USED

Fach data record can only contain one generic record.

*▶ NOT USED* 

➤ NOT USED

- **099** > Form 760CG, Line 24
  - Form 760PY, Line 19
  - Form 763, Line 20
  - > Total payments and credits (760CG line 24, Field 490; 760PY line 19, Field 490; 763 line 20, Field 490) must be the sum of all payments and credits (760CG lines 18a-Field 450, line 18b-Field 455, line 19-Field 465, line 20-Field 470, line 21-Field 475, line 22-Field 480, and line 23-Field 485; Form 760PY lines 18a-Field 450, line 18b-Field 455, line 18c-Field 470, line 18e-Field 475, line 18f-Field 480, and line 18g-Field 485; 763 lines 19a-Field 450, line 19b-Field 455, line 19c-Field 465, line 19d-Field 470, line 19e-Field 475, line 19f-Field 480, and line 19g-Field 485).
- 100 > If Direct Debit (Field 024=2), Amount You Owe (Field 525) must be greater than 0, direct debit date (Field 027) must be in date format YYYYMMDD, direct debit amount (Field 028) must be greater than 0 and cannot exceed Amount You Owe (Field 525), Routing and Transit Number (Field 030) must be valid, and bank account number (Field 035) must be valid.
- **101** ➤ *NOT USED*
- **102** *▶ NOT USED*
- **103** ➤ *NOT USED*
- **104** ➤ NOT USED
- **105** ➤ NOT USED
- **106** ➤ NOT USED
- **107** ➤ NOT USED
- **108** ➤ NOT USED
- 109 > NOT USED
- 110 > NOT USED

### **APPENDIX C- VIRGINIA FORMS AND FIELD NUMBERS**

2008 VA760CG
Individual Income Tax Return

070-11FIRSTNAME12 | 1LASTNAME15XXXX | SUF 060-3 070-31FIRSTNAME12 I-1LASTNAME15XXXX-SUF 065-3

Fili	ng atus: 1	Ü	9 <b>5-1</b> Head Hous	1 of sehold: <b>30</b>	)5-4X	Change: Address	X <b>305-27</b>	NOL:	X 315-11	
Ota	1103. <u>I</u>		11000	oci ioia.oc	70 -21	Change:	X	Federal Earr		
Exe	emptions Dependents 305-5 305-8	Total	65 and over <b>305-6</b>	Blind <b>305-7</b>	Total	Virginia Return Not Filed Last Year	305-28	Income Cred	lit X <b>315-9</b> 0	000
Υοι	urself 1 00	00	1	1	0					
Spo		320-7	1	1	320-8	Your SSN	MMMM		000000	00
	305-10		305-11							
\	/endor ID:	X000C		000		Spouse's SSN	MMMM		000000	000
4	F. d Ad: O	305-42			020, posi			40-	2000000	420
1.	Fed Adj Gross Income	1.	-000	00000	00.310-	5 16a.Your VAGI		16a. – (	0000000.	430
2.	Additions, see Pg 2, Li	ne 3 2.	000	0000	00.310-	7 16b.Spouse's VA	\GI	16b. –	00000000.	435
3.	Subtotal	3.	-000	00000	00.315-	<b>1</b> 17. Net Tax		17. 0	00000000.	445
4a.	Age Deduction - You	4a.		0000	00.315-	3 18a. Your Withho	olding	18a. 0	00000000.	450
4b.	Age Deduction - Spous	se 4b.		0000	00.315-	4 18b.Spouse's Wi	thholding	18b. 0	00000000.	45
5.	Soc Sec & Tier 1 Railro	oad 5.	000	00000	00.315-	3 19. Estimated P	ayments	19. 0	00000000.	46
6. 7.	State Inc Tax Overpays Other Subtractions,	ment 6.	000	00000	00.315-	7 20. Extension Page	ayments	20. 0	00000000.	470
	see Pg 2, Line 7	7.	000	00000	00.315-	8 21. Credit for Lo	w Income	21.	00000.	47
8.	Subtotal Subtractions	8.	000	00000	00. <b>320</b> -	1 22. Credit tax paid	d another stat 305.36	e 22. 0	00000000.	48
9. 10a	Total VAGI a.Federal Sch. A	9.				<ol> <li>23. Other Credit</li> <li>24. Total Payme</li> </ol>			00000000.	
	Itemized Deductions	10a.	000	00000	00.320-	5 /Credits		24. 0	00000000.	49
	o.State/Local Income Tax Standard/Itemized	( 10b.	000	00000	00. 320-	<b>6</b> 25. Tax You Owe	е	25. 0	00000000.	49
	Deductions	10.	000		00.370	<ul><li>26. Overpaymer</li><li>27. Amount to</li></ul>	nt Amount		00000000.	50
	Exemptions Deductions VAGI,	11.			00.375	Credit to Nex	xt Year's Tax		00000000.	51
13.	see Pg 2, Line 9 Subtotal Lines 10,	12.			00.385	28. Adjustments/ Amount You	Owe:		00000000.	51
	11 and 12	13.			00.395	Paid by Credi	it Card X	1	00000000.	52
14.	VA Taxable Income	14.	- 0 0 0	00000	00.405	Refund: Bank Routing		)48 "X" for \$		5
15.	Tax Amount	15.	000	00000	00. <b>425</b>	Number Bank Account		r Checking	000000000	0
16.	Spouse Tax Adjustmen	nt 16.		0 (	00. 440	Number	0	0000000	00000000	03

### 2008 VA760CG Page 2

1FIRSTNAME12 I 1LASTNAME15XXXX SUF 000000000



	DITIONAL FILING	INFORMA		Г	Deductions			$\neg$	
	rming/ Fishing, erchant Seaman:	77 20E 46	Coalfield	mont 205 49 V		Code and Amo	ount	76002 0000	
		X 305-16 P2 0050		ment <b>305-18</b> X		<b>098</b> 000	8a.	<b>760P2 0099</b> -000000000.	
	xpayer /60 ceased:	0	Fixed Da Conformi			036 000	oa.	760P2 0101	
	pendent on other's return:	X305-15	Overseas when due			<b>100</b> 000	8b.	000000000. <b>760P2 0103</b>	
	ss-Through-Entity	11000 10	Wilon dat	. 000 11 1		<b>102</b> 000	8c.	000000000.	
	thholding included							760P2 0104	
	this return:	X <b>315-12</b>			9. Total Dedu	uctions:	9.	-000000000.	
Ad	lditions - SCH ADJ/	CG - Part	1						
						e - Filing Status			
1.	Interest on obligation	ons		760P2 0053			CNAME15	5XXXXXXXXXX	
	of other state			000000000	. AGE DEDUCT				
2.				760P2 0054			2 0093	760P2 0094	
	a. Fixed Date Conf	•		000000000	. You	000		-000000000.	
	760P	<b>2 0055</b> 0 0		760P2 0056	0	760P2	2 0095	760P2 0096	
	7600	2 <b>0057</b>		000000000 <b>760P2 0058</b>	. Spouse	000	000	-000000000.	
				000000000					
		0 0		760P2 0059	. Contact Infor	mation			
3.	Total Additions:			000000000		<b>15-1</b> 000000	0000	000000000	305-20
Sul	otractions				Spouse			000000000	305-21
4.	Income from obliga	tions	760P2 006	60	Dept of Taxation	on can discuss			
	or securities of the		4.	000000000				X	305-24
5.	Disability Income		760P2 006	<b>51</b>	Preparer Phor			000000000	300-3
	reported as wages		5.	00000000		050-1 OF		_	
	5-38 <sub>X You:</sub> 760F 5-39 <sub>X Spouse:</sub> 760F	22 0105 22 0106			Preparer Info	000000	000	• 0	305-37
<b>S</b> .	Other:			760P2 0062	l (We), the unde	ersigned, declare	under penal	Ity of law that I (we) have	
	a. Fixed Date Confo	rmity	6a.	00000000	0 . examined this r	return			
	760	0P2 0063		760P2 0064		t of my (our) know	ledge, it is a	a true, correct and complete	!
	70	00		000000000				5.4	
	700	<b>0P2 0065</b> 00		760P2 0066	•			Date	
	76	0P2 0067		000000000 <b>760P2 0068</b>					
		00		000000000		ature		Date	
				760P2 0069					
7.	Total Subtractions:		7.	000000000		ture		Date	
•							OR 300		
					MMMMMMM	MMMMMMMM	MMMMMIN	MMMMMMMMMMMM	M
					052-2 MMMMMMM	MMMMMMMM	MMMMM	MMMMMMMMMMMMMM	M

### 2008 Virginia Schedule ADJ/CG Part 2



1FIRSTNAME12 I 1LASTNAME15XXXX SUF 000000000

Tax Credit for Low Income Income VA Earned Income Credit	dividuals	Г							
•	Social Security Number		VAGI		Voluntary C		ns		
0092 a. IIIIIIIIIIIIIIII 0095 b. IIIIIIIIIIIII 0098 c. IIIIIIIIIIIIII	0000000 0000000 0000000	0 <b>0096</b> 0 <b>0099</b>	- 0 0 0 0 0 - 0 0 0 0 0	.0097 .0100	nom overpa	0067	00	22a.	00000.0068
e. Total Family VAGI	00000000 10e. •		-00000			0069	00	22b.	00000.0070
11. Total Exemptions	11. •		00	23. <b>0105</b>	Other Volun	•			00000 0070
12. Personal Exemptions	12.		00	0106		0071 0073	00	23a. 23b.	00000.0072
13. Form 760 exemptions multiply Line 12 by \$300	13.	0107	0000		School Fou	ndation C	Contribu	utions	
14. Federal Earned Income Cr	edit 14.	0108	0000	•	0075	000	000	23c.	00000.0076
15. Multiply Line 14 by 20% (.2	20) 15.	0109	0000	•	0077	000	000	23d.	00000.0078
16. Greater of Line 13 or Line	15 16.	0110	0000	. 24.	Total Adjust	ments			00000000.0081
17. Credit (Lesser of Line 16 above or Page 1, Line 17)	17.	0111	0000						
Adjustments to Amount of Ta	x								
18. Addition to Tax	18.	000	000000	. 0059	)				
a. Addition from Form 760	C X 0060								
b. Addition from Form 760I	X 0061								
19. Penalty	19.	000	000000	. 0062					
a. Late Filing Penalty	X 0063								
b. Extension Penalty	X 0064								
20. Interest	20.	000	000000	. 0065					
21. Consumer's Use Tax	21.	000	000000	. 0066	ī				ı

### 2008 Virginia Schedule FED



**110-1** 

	SCHEDULE	C, SCHEDULE C-EZ and/or SCI	HEDULE F INFORMATION	$\neg$						
1.	Schedule Name	First Schedule Info. X 0092	Second Schedule Info. X 0093							
2.	Gross Receipts or Sales	00000000. <b>0050</b>	00000000. <b>0051</b>							
3.	Depreciation/ expense deduction	000000000.0052	00000000. 0053							
4.	Business Activity Code									
	•									
5.	Business Locality Code	000 0056	000 <b>0057</b>							
6.	Car and truck expenses	00000000. 0058	00000000. <b>0059</b>							
7.	Inventory at end of year  Number of miles you used your	00000000.0060	00000000. <b>0061</b>							
8.	vehicle for: Business	00000000 <b>0062</b>	00000000 0063							
	Number of miles you used your vehicle for: <b>Commuting</b>	00000000 <b>0064</b>	00000000 0065	;						
10.	Number of miles you used your vehicle for: <b>Other</b>	00000000 0066	00000000 0067							
SCHEDULE 2106 and/or SCHEDULE 2106-EZ INFORMATION										
	Number of miles you used your vehicle for: <b>Business</b> Number of miles you used your	00000000 0068	00000000 0069							
	vehicle for: Commuting	00000000 <b>0070</b>	00000000 <b>0071</b>							
	Number of miles you used your vehicle for: <b>Other</b> Percent of business use of	00000000 0072	00000000 0073							
	vehicle: Vehicle 1	00000 0074	00000 0075							
15.	Percent of business use of vehicle: <b>Vehicle 2</b>	00000 0076	00000 0077							
16.	Property Used more than 50% in a qualified business use:	SCHEDULE 4562 INFORM	MATION							
	Type of property	MMMMMMMMMMMM	<b>0078</b> MMMMMMMMMMMM	0079						
17. 18.	Date placed in service Business/investment	MMDDYY	0080 MMDDYY	0081						
	use percentage	00000	0082 00000	0083						
19.	Cost or other basis	00000000.	000000000.	0085						
20.	Depreciation deduction	00000000.	0086 000000000.	0087						
21.	Elected section 179 cost	000000000.	000000000.	0089						
22.	Business Locality Code	000	0090 000	0091						

### 2008 Virginia Schedule OSC/CG



1FIRSTNAME12 I 1LASTNAME15XXXX SUF

Credit	Comp	utation	<b>State</b>
--------	------	---------	--------------

CI	aiming border state			<b>0050</b> X				
1.	Filing Status claimed on the other state's return			<b>0051</b> 0	6.	Identify the state and <b>ATTACH</b> a copy of the other state's return	l	<b>0056</b> XX
2.	Enter the number below to identif person claiming the credit 1. You	•	se 3.	<b>0052</b> 0	7.	Virginia income tax	0057	000000000.
3.	Qualifying taxable income on which other state's tax is based	0053	00000	00000.	8.	Income percentage	0058	000.0
4. 5.	Virginia taxable income Qualifying tax liability owed to	0054	0000	00000.	9.	Multiply Line 7 by Line	0059	000000000.
J.	the	0055	00000	00000.	10.	Credit. Enter lesser of Line 5	0060	000000000.

### **Credit Computation State**

11.	Filing Status claimed on the other state's return		0061	0	16.	Identify the state and <b>ATTACH</b> a copy of the other state's return	C	066 XX
12.	Enter the number below to identify a person claiming the credit 1. You 2.		<b>0062</b> e 3.	0	17.	Virginia income tax	0067	000000000.
13.	Qualifying taxable income on which other state's tax is based	0063	00000000	00.	18.	Income percentage	0068	000.0
	Virginia taxable income  Qualifying tax liability owed to	0064	00000000	00.	19.	Multiply Line 17 by	0069	00000000.
10.	the	0065	00000000	0.	20.	Credit. Enter lesser of Line 15 or	1 <b>9070</b>	000000000.

### Credit Computation State

Filing Status claimed on the other state's return	<b>0071</b> 0		Identify the state and <b>ATTACH</b> a copy of the other state's return	00	76 XX
Enter the number below to identify to be son claiming the credit 1. You 2.		27.	Virginia income tax	0077	00000000.
Qualifying taxable income on which other state's tax is based	0073 000000000	. 28.	Income percentage	0078	000.0
Virginia taxable income	<b>0074</b> 000000000	. 29.	Multiply Line 27 by	0079	000000000.
Qualifying tax liability owed to he	<b>0075</b> 000000000	. 30.	Credit. Enter lesser of Line 25 or 2	29080	00000000.

2008
Schedule CR
CREDIT COMPUTATION SCHEDULE - See Page 6 for required attachments. Attach this to your return. See instructions for other required attachments.

1FIRST	NAME12 I 1LASTNAME15XXXXSUF	_	_
PARTI -	MAXIMUM NONREFUNDABLE CREDITS		000000000 <b>003</b>
1	Enter the total tax computed on your return less the total of Spouse Tax Adjustment, Credit for		
	Low Income Individuals or VA Earned Income Credit and Credit for Tax Paid to Another State. The n	maximum	
	nonrefundable credits allowable on Line 107 of Schedule CR may not exceed this amount		000000000000000000000000000000000000000
PART II -	ENTERPRISE ZONE ACT CREDIT		00000000. <b>050</b>
2	Credit allowable this year from Form 301 (attach Form 301)	2	0000000
	NEIGHBORHOOD ASSISTANCE ACT CREDIT	2	00000000.
3	Authorized amount of Neighborhood Assistance Act Credit		
4			
	Carryover credit from prior year(s) [attach computation]		
5 6	Add Line 3 and Line 4		
	Line 5 or balance of maximum credit available, whichever is less	6	00000000.
7	Carryover credit to next year: Line 5 less Line 6 (applicable only		
,	if within 5 year carryover period)77		
	ii witiiii 3 year carryover periody		
PART IV -	RECYCLABLE MATERIALS PROCESSING EQUIPMENT CREDIT		
8	Enter 10% of qualifying recyclable equipment cost 8 8		
9	Carryover credit from prior year(s) [attach computation]9		
10	Add Lines 8 and 91010		
11	Enter 40% of tax per return		
12	Maximum recyclable materials processing equipment credit.		
	Line 10 or Line 11, whichever is less		
13	Credit allowable this year: Line 12 or balance of maximum credit		
	available, whichever is less	13	00000000.
14	Carryover credit to next year: Line 10 less Line 13		0000000.
	(applicable only if within 10 year carryover period)		
PART V -	CONSERVATION TILLAGE EQUIPMENT CREDIT		
15	Enter 25% of qualifying property cost or \$4,000, whichever is less 15		
16	Carryover credit from prior year(s) [attach computation]161		
17	Add Line 15 and Line 16 17 17		
18	Credit allowable this year: Line 17 or balance of maximum credit		
	available, whichever is less	18	00000000.
19	Carryover credit to next year: Line 17 less line 18 (applicable only		
	if within 5 year carryover period)		
	FERTILIZER AND PESTICIDE APPLICATION EQUIPMENT CREDIT		
20	Enter 25% of current qualifying equipment cost or \$3,750,		
	whichever is less		
21	Carryover credit from prior year(s) [attach computation]		
22	Add Line 20 and Line 21		
23	Credit allowable this year: Line 22 or balance of maximum credit	00	0000000
24	available, whichever is less	23	00000000.
24			
PART VII -	if within 5 year carryover period)24 24 24		
25	0054		
25 26	Enter 50% of qualifying rent reductions	_	
27	Add Line 25 and Line 26	L	
28	Credit allowable this year: Line 27 or balance of maximum credit		
	available, whichever is less	28	00000000. <b>0054</b>
29	Carryover credit to next year: Line 27 less Line 28 (applicable only if		
	if within 5 year carryover period)		

See Page 6 for required attachments.



#### 1FIRSTNAME12 I 1LASTNAME15XXXX SUF

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PART VIII - CLEAN-FUEL VEHICLE AND VEHICLE EMISSIONS TESTING EQUIPMENT	
Clean-fuel vehicle and qualified electric vehicle credit	

30	EXPIRED30	<	
31	Carryover credit from prior year(s) [attach computation]	<del></del>	
32	Add Lines 30 and 31		
33	Line 32 or balance of maximum credit available, whichever is less		00000000.
34	Carryover credit to next year: Line 32 less Line 33 (applicable only		
01	if within 5 year carryover period)		
Vehic	le emissions testing equipment credit		
35	Enter 20% of the purchase or lease price paid during the year for		
33	qualified vehicle emissions testing equipment35		
36	Carryover credit from prior year(s) [attach computation]		
37	Add Line 35 and Line 36		
38	Enter the amount from Line 37 or the balance of maximum credit		
00	available, whichever is less	38	00000000.
39	Carryover credit to next year: Line 37 less Line 38 (only if within		0000000.
	5 year carryover period)		
DADT IY	- MAJOR BUSINESS FACILITY JOB TAX CREDIT		
40a	Credit amount authorized by the Department of Taxation		
40a 40	Credit allowable this year: Line 40a or the balance of the maximum		
40	credit available, whichever is less	40	00000000.
41	Carryover credit to next year. Compute on Form 304 if within the 10 year	40	0000000.
71	carryover period (Line 40a less Line 40)		
	curryover period (Eine 40d 1635 Eine 40)		
PART X	- FOREIGN SOURCE RETIREMENT INCOME TAX CREDIT		
42	Qualifying taxable income on which the tax in the foreign		
	country is based		
43	Virginia taxable income. See instructions43		
44	Qualifying tax paid to the foreign country.		
	Enter name of country: 44		
45	Virginia income tax. See instructions45		
46	Income percentage. Divide Line 42 by Line 43. Compute to one decimal		
	place, not to exceed 100%. For example, 0.3163 becomes 31.6% 46		
47	Multiply Line 45 by Line 46		
48	Credit allowable this year: Enter the lesser of Line 44 or Line 47,		
	not to exceed the balance of maximum credit available	48	00000000.
PART XI	- HISTORIC REHABILITATION TAX CREDIT		
49	Enter the amount of eligible expenses (attach certificate)		
50	Multiply the amount on Line 49 by 25% 5050		
51	Carryover credit from prior year(s) [attach computation]		
52	Add Line 50 and Line 51		
53	Credit allowable this year: Enter the amount from Line 52 or the		
	balance of maximum credit available, whichever is less	53	00000000.
54	Carryover credit to next year:	ı	
	Line 52 loce Line 53 (10 year carryover period) 54	L	_

#### 2008 Schedule CR page 3

See Page 6 for required attachments.



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#### 1FIRSTNAME12 T 1LASTNAME15XXXX SUF 00000000 PART XII - DAY-CARE FACILITY INVESTMENT TAX CREDIT 55 Enter 25% of eligible expenses, not to exceed \$25,000 ...... 55 \_\_\_ 0056 Carryover credit from prior year(s) 56 0057 57 58 Credit allowable this year: Enter the amount from Line 57 or the 00000000.0059 59 Carryover credit to next year: Line 57 less Line 58. PART XIII - LOW- INCOME HOUSING CREDIT 0061 60 0062 60a Carryover credit from prior year(s) [attach computation] ............... 60a 0063 60b 61 Credit allowable this year: Enter amount from Line 60b or 00000000.0064 62 Carryover credit to next year: Line 60b less Line 61 0065 (5 year carryover period) ...... 62 \_\_\_ PART XIV - AGRICULTURAL BEST MANAGEMENT PRACTICES TAX CREDIT Enter 25% of qualified expenditures, not to 63 64 65 66 Credit allowable this year: Enter amount from Line 65 or the 0000000. 67 Carryover credit to next year: Line 65 less Line 66. (5 year carryover period.)...... 67 \_ PART XV – QUALIFIED EQUITY AND SUBORDINATED DEBT INVESTMENTS TAX CREDIT You Spouse 68 Credit amount of qualified equity and subordinated Debt Investments Tax Credit authorized by the Virginia Department of Taxation......68A 0066 69 Carryover credit from prior year(s) 0067 [attach computation] ...... 69A \_ Add Lines 68 and 69 ...... 70A \_\_\_\_\_ 0068 в\_\_\_\_ 0119 70 71 Credit allowable this year: Enter the amount on Line 70A and/or 70B or the balance of maximum credit available, whichever is less 0000000.0069 00000000.0120 Be sure to claim the proper credit on the total lines Spouse Credit 71B 72 Carryover to next year: Line 70 less Line 71 **0070** в 0121 (15 year carryover period) ...... 72A \_\_\_ PART XVI - WORKER RETRAINING TAX CREDIT Enter amount of worker retraining tax credit authorized by the 73 0071 0072 74 0073 75 Add Line 73 and Line 74...... 75 \_\_\_\_ 76 Credit allowable this year: Enter the amount from Line 75 or the 00000000.0074 77 Carryover credit to next year: Line 75 less Line 76 PART XVII - WASTE MOTOR OIL BURNING EQUIPMENT CREDIT Enter 50% of the purchase price paid during the taxable year for equip-78 ment used exclusively for burning waste motor oil at your facility ...... 78

Credit allowable this year: Enter the amount from Line 78 up to

79

#### 2008 Schedule CR page 4

See Page 6 for required attachments.

#### 1FIRSTNAME12 I 1LASTNAME15XXXX SUF



PART XVIII - CREDIT I	FOR PURCHASE OF LONG-TERM CARE INSURANCE	
Enter the d	ate policy was issued to you. Issue date must be	Months Covered

					NA41	ns Covered
	Enter the date policy was issued to you. Issue date must be					
	on or after 1/01/2006		0082	You	0 0	0122
	Enter the date policy was issued to your spouse. Issue date must be					
	on or after 1/01/2006		0083	Spouse	0 0	0123
80	If the policy for which you are claiming the credit was purchased prior					
	to 2008, enter the amount of the premiums paid for the first 12 months					
	of coverage. If the policy was purchased on or after					
	1/1/08, skip to line 8180	)	0076			
80a	Multiply Line 80 by 15% (.15)80	)a	0077			
80b	Enter total amount of credits claimed for this policy in prior years80	0b	0113			
80c	Subtract Line 80b from Line 80a. This is the maximum amount of credit					
	that you may claim for 2008. If Line 80b is equal to Line 80a, you may			_		
	no longer claim this credit for this policy80	)c	0114			
81	Enter the amount premium paid in 200881	1	0078			
81a	Multiply Line 81 by 15% (.15)81	la	0115			
81b	Enter the amount from Line 80c (if completed) or Line 81a,					
	whichever is less81	lb	0131			
81c	Enter carryover from prior year(s) [attach computation]81	lc	0116			
82	Add Lines 81b and 81c82	2	0079			
83	Credit allowable this year: Enter the amount from Line 82 or the					
	balance of maximum credit available, whichever is less.			83		
84	Carryover credit to next year: Line 82 minus Line 83				0	0800.000000
	(5 year carryover period)84		0081	_		
PART XIX –	BIODIESEL AND GREEN DIESEL FUELS TAX CREDIT					
85	Enter the amount of biodiesel and green diesel fuels tax					
	authorized by the Virginia Department of Taxation or the					
	amount transferred to you in 2008					
86	Carryover credit from prior year(s) [attach computation]86 _					
87a	Add Lines 85 and 8687a	$\rightarrow$	~			
87b	Enter the total credit transferred to others in 200887b					
87c	Subtract Line 87b from Line 87a87c					
88	Credit allowable this year: Enter the amount from Line 87c					
00	oroan anomabio and your. Enter the amount from Ente 076					

0000000. 89 Carryover credit to next year: Line 87c less Line 88 (3 year carryover period) ...... 89 \_

0092

0093

#### PART XX - LIVABLE HOME TAX CREDIT (formerly Home Accessibility Credit) 90 Enter the amount of the Livable Home Tax Credit authorized

by the Department of Housing and Community Development .......... 90

91	Carryover credit from prior year(s) [attach computation]91	
92	Add Line 90 and Line 9192 0094	
93	Credit allowable this year: Enter the amount on Line 92	
	or the balance of maximum credit available, whichever is less	93
94	Carryover credit to next year: Line 92 less Line 93	
	(5 year carryover period)9494	

0000.0095

PART XXI - RIPARIAN WATERWAY BUFFER CREDIT

95	Enter the amount of Riparian Waterway Buffer tax credit			1
	authorized by the Virginia Department of Forestry (attach		0007	_
	certification)	95	0097	
96	Carryover credit from prior year(s) [attach computation]	96	0098	
97	Add Line 95 and Line 96	97	0099	
98	Credit allowable this year: Enter the amount on Line 97			
	or the balance of maximum credit available, whichever is less			98
99	Carryover credit to next year: Line 97 less Line 98		0404	
	(5 year carryover period)	99	0101	

0000000.0100

### 2008 Schedule CR page 5 See Page 6 for required attachments.



#### 1FIRSTNAME12 I 1LASTNAME15XXXX SUF

11 1100	I HASINAMEIS	.XXX DO.	T.			
PART XXI	I – LAND PRESERVATION TAX CREDIT	You		Spouse		00000000
100	Credit amount originating in 2008 or the amount	100		Opodoo		
	of credit transferred to you in 2008100A	0102	В	0124		
101	Carryover credit from prior year(s)					
	[attach computation] 101A _	0103	В_	0125	<u> </u>	•
101a	Add Lines 100 and 101 101aA_	0104	В_	0126		
101b	Total credit transferred to others in 2008101bA _	0105	B_	0127		
102	Subtract Line 101b from Line 101a102A _	0106	B _	0128		
103	Credit allowable this year: Enter the amount from L	ne 102A and/or	102B			
	or the balance of maximum credit available, whiche					0000000000000
	(not to exceed \$100,000 per taxpayer)				Your credit 103A	00000000.0107
	Be sure to claim the proper credit on the total lin	100			Spouse's credit 103B	00000000.0129
104	Carryover credit to next year: Line 102 less	163			opouse's credit 103B	0000000000123
	Line 103 104A	0108	В	0130		
	-					
PART XX	III – POLITICAL CONTRIBUTIONS CREDIT					
105	Enter 50% of the amount of eligible political contrib					
	limited to \$25 for individuals or \$50 for married filin				105 <u><b>0109</b></u>	
106	Credit allowable this year: Enter the amount on li				100	0.0 0440
DADT VV	or the balance of maximum credit available, whiche IV – TOTAL NONREFUNDABLE CREDITS	ever is less			106	00.0110
107	Add Lines 2, 6, 13, 18, 23, 28, 33, 38, 40, 48, 53,					
107	58, 61, 66, 71A, 71B, 76, 79, 83, 88, 93, 98, 103A,	103B and 106 I	lf vou			
	have claimed more than the maximum allowed nor		ii you			
	credits, see instructions.				107	00000000.0111
PART XX	V – VIRGINIA COAL EMPLOYMENT AND PR	ODUCTION IN	ICENTI	VE and		
	COALFIELD EMPLOYMENT ENHANCEM	ENT TAX CRE	DITS			
108	100% Coalfield Employment Enhancement and/or	•				
	Production Incentive Tax Credits from Line 1 of you		e 306B		108	00000000.
108a	25% Coalfield Employment Enhancement Tax Cred					0000000
	from Line 2 of your 2008 Schedule 306B				108a	00000000.
109	Full credit: Enter amount from your 2008 Form 306	, Line 12a			109	00000000.
	•					
109a	Full credit: Enter amount from your 2008 Form 306	, Line 12b			109a	0000000.
110	85% Credit: Enter amount from your 2008 Form 30	6, Line 13a			110	0000000.
1100	000/ Coolfield Credit: Enter creeuest from vour 2006	) Farm 206 Line	106		1100	00000000.
110a 111	90% Coalfield Credit: Enter amount from your 2008 Total Coal Related Tax Credits allowable this year:	Form 306, Line	130		110a	0000000.
111	Add Lines 109, 109a, 110 and 110a				111	00000000.
112	2008 Coalfield Employment Enhancement Tax Cre					
	be used when completing your 2011 return:					
	Enter the amount from your 2008 Form 306, Line 1	1			112	00000000.
PART XX	VI – TOTAL REFUNDABLE CREDITS					
113	Reserved for future use.				113	L
114	Refundable total Coalfield Employment Enhancement	•				
	Employment and Production Incentive Tax Credits	from Line 111			114	00000000.
115	Enter the total of Line 113 and Line 114				44.5	00000000.
	VII – TOTAL CURRENT YEAR CREDITS				TI5	0000000.
116	Total credits allowable this year. Enter the total of L	ine 107				
	and Line 115 here and on Line 23 of Form 760, Lin		60PY or			
	Line 19g of Form 763				116	00000000.0112

# Schedule CR Attachment -- Credit for Long Term Care Insurance

PRIMARY

0084

MMDDYYYY

0085 MMDDYYYY

**SPOUSE** 

Date of last policy premium pymt for tax year

Date of first policy premium pymt for tax year

0086 MMDDYYYY 0087 MMDDYYYY

Total premiums paed for tax year

**0088** 

**0089** 

Policy Number

**0090**ММММММММММММММММММ

**0091**МММММММММММММММММММ

### **Overflow Statement**

#### **Deductions**

#### **Deductions -- PY Status 4 Col A ONLY**

<b>0050</b> 0 0 0	005100000000000.0052000	0053 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	011000000000000.0111000	0112000000000000.
<b>0054</b> 0 0 0	005500000000000.0056000	0057 () () () () () () () () () () () () ()	011400000000000.0115000	0116000000000000.
<b>0058</b> 0 0 0	0059000000000000000000	0061 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	011800000000000.0119000	0120000000000000.
<b>0062</b> 0 0 0	006300000000000.0064000	0065 0 0 0 0 0 0 0 0 0 0 0 0 .0121 0 0 0	<b>0122</b> 0000000000000000000000000000000000	012400000000000.
<b>0066</b> 0 0 0	006700000000000.0068000	0069 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	012600000000000000000000000000000000000	012800000000000.
0070 000	007100000000000.0072000	0073 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	013000000000000000000000000000000000000	013200000000000.
	Total	007400000000000.	Total	013300000000000.

#### **Subtractions**

#### Subtractions -- PY Status 4 Col A ONLY

<b>0168</b> 0 0	016900000000000.017000	0171000000000000.024300	<b>0244</b> 0000000000 <b>.0245</b> 00	0246000000000000.
<b>0172</b> 0 0	017300000000000.017400	01750000000000000.024700	024800000000000.024900	<b>0250</b> 000000000000.
0176 0 0	017700000000000.017800	0179 0 0 0 0 0 0 0 0 0 0 .0251 0 0	<b>0252</b> 0 0 0 0 0 0 0 0 0 0 <b>. 0253</b> 0 0	<b>0254</b> 00000000000.
0180 0 0	018100000000000.018200	0183 0 0 0 0 0 0 0 0 0 0 .0255 0 0	025600000000000.025700	<b>0258</b> 00000000000.
0184 () ()	01850000000000.018600	0187 () () () () () () () () () () () () ()	026000000000000000000000000000000000000	<b>0262</b> 00000000000.
0188 0 0	01890000000000.019000	0191000000000000.026300	<b>0264</b> 0 0 0 0 0 0 0 0 0 0 <b>. 0265</b> 0 0	<b>0266</b> 00000000000.
0192 () ()	01930000000000.019400	0195 0 0 0 0 0 0 0 0 0 0 .0267 0 0	02680 0 0 0 0 0 0 0 0 0 0 . 02690 0	<b>0270</b> 000000000000.
0196 () ()	01970000000000.019800	0199 0 0 0 0 0 0 0 0 0 0 .0271 0 0	027200000000000000000000000000000000000	027400000000000.
0200 () ()	02010000000000.020200	0203 0 0 0 0 0 0 0 0 0 0 .0275 0 0	027600000000000000000000000000000000000	0278000000000000.
0204 0 0	02050000000000.020600	0207 0 0 0 0 0 0 0 0 0 0 .0279 0 0	028000000000000000000000000000000000000	<b>0282</b> 00000000000.
	Total	020800000000000.	Total	028300000000000.

	Additions	Contributions from Refund		
0318 () () 0322 () ()	031900000000000.032000 032300000000000.032400 Total	0321 0 0 0 0 0 0 0 0 0 0 .0408 0 0 0325 0 0 0 0 0 0 0 0 0 0 .0412 0 0 0326 0 0 0 0 0 0 0 0 0 0 .0416 0 0 0420 0 0 0424 0 0	04090 0 0 0 0 0 0 0 0 0 0 0 0 0 04100 0 04130 0 0 0 0 0 0 0 0 0 0 0 0 04140 0 04170 0 0 0 0 0 0 0 0 0 0 0 04180 0 04210 0 0 0 0 0 0 0 0 0 0 0 04220 0 04250 0 0 0 0 0 0 0 0 0 0 0 04260 0	041100000000000. 04150000000000. 04190000000000. 04230000000000.
0361 0 0 0365 0 0 0369 0 0	Ontributions from Refund Ol 0362000000000000.036300 03660000000000000.036700 03700000000000000.037100 Total	R Tax Payment 0428 0 0 0432 0 0 0436 0 0 000 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	042900000000000.043000 043300000000000.043400 04370000000000.043800 04410000000000.044200 044500000000000. Tota	043100000000000000000000000000000000000

#### **Public School Foundations**

<b>0481</b> 000000	0482 000000000.048300000	0484 00000000.048500000	0486 0 0 0 0 0 0 0 0 0 . 04870 0 0 0 0 0	0488 0 0 0 0 0 0 0 0 0 .
<b>0489</b> 0 0 0 0 0 0	0490 000000000.049100000	0492 00000000.049300000	<b>0494</b> 0 0 0 0 0 0 0 0 0 <b>. 0495</b> 0 0 0 0 0	0496 0 0 0 0 0 0 0 0 0 0 .
<b>0497</b> 0 0 0 0 0 0	0498 000000000.049900000	<b>0500</b> 000000000. <b>0501</b> 00000	<b>0502</b> 0 0 0 0 0 0 0 0 . <b>0503</b> 0 0 0 0 0	0504 0 0 0 0 0 0 0 0 0 0 .
<b>0505</b> 0 0 0 0 0 0	0506 000000000.050700000	0508 00000000.050900000	<b>0510</b> 0 0 0 0 0 0 0 0 0 <b>. 0511</b> 0 0 0 0 0	<b>0512</b> 0 0 0 0 0 0 0 0 0 .
<b>0513</b> 0 0 0 0 0 0	0514 000000000.051500000	0516 00000000.051700000	<b>0518</b> 0 0 0 0 0 0 0 0 0 <b>. 0519</b> 0 0 0 0 0	0520 0 0 0 0 0 0 0 0 0 0 .
<b>0521</b> 0 0 0 0 0 0	0522 00000000.052300000	<b>0524</b> 00000000. <b>0525</b> 00000	<b>0526</b> 0 0 0 0 0 0 0 0 0 . <b>0527</b> 0 0 0 0 0	0528 0 0 0 0 0 0 0 0 0 0 .
<b>0529</b> 0 0 0 0 0 0	0530 000000000.053100000	0532 00000000.053300000	<b>0534</b> 0 0 0 0 0 0 0 0 0 <b>. 0535</b> 0 0 0 0 0	0536 000000000.
<b>0537</b> 0 0 0 0 0 0	0538 000000000.053900000	0540 00000000 .054100000	<b>0542</b> 0 0 0 0 0 0 0 0 0 <b>. 0543</b> 0 0 0 0 0	<b>0544</b> 00000000.
<b>0545</b> 0 0 0 0 0 0	0546 000000000.054700000	0548 00000000.054900000	<b>0550</b> 0 0 0 0 0 0 0 0 0 <b>. 0551</b> 0 0 0 0 0	0552 0 0 0 0 0 0 0 0 0 .
<b>0553</b> 0 0 0 0 0 0	<b>0554</b> 00000000. <b>0555</b> 00000	<b>0556</b> 00000000 <b>.0557</b> 00000	<b>0558</b> 0 0 0 0 0 0 0 0 0 <b>. 0559</b> 0 0 0 0 0	0560 000000000.
<b>0561</b> 000000	0562 00000000.056300000	<b>0564</b> 00000000. <b>0565</b> 00000	<b>0566</b> 0 0 0 0 0 0 0 0 0 . <b>0567</b> 0 0 0 0 0	<b>0568</b> 0 0 0 0 0 0 0 0 0 .
<b>0569</b> 0 0 0 0 0 0	0570 00000000.057100000	0572 00000000.057300000	<b>0574</b> 0 0 0 0 0 0 0 0 0 <b>. 0575</b> 0 0 0 0 0	0576 0 0 0 0 0 0 0 0 0 0 .
<b>0577</b> 00000	0578 00000000.057900000	0580 00000000.058100000	<b>0582</b> 0 0 0 0 0 0 0 0 0 . <b>0583</b> 0 0 0 0 0	<b>0584</b> 0 0 0 0 0 0 0 0 0 .
<b>0585</b> 0 0 0 0 0 0	<b>0586</b> 00000000. <b>0587</b> 00000	0588 00000000.058900000	<b>0590</b> 0 0 0 0 0 0 0 0 0 . <b>0591</b> 0 0 0 0 0	0592 0 0 0 0 0 0 0 0 0 .
<b>0593</b> 0 0 0 0 0 0	0594 00000000.059500000	0596 00000000.059700000	0598 0 0 0 0 0 0 0 0 0 . 05990 0 0 0 0 0	0600 0000000000.
<b>0601</b> 000000	0602 000000000.060300000	<b>0604</b> 00000000.060500000	0606 0 0 0 0 0 0 0 0 0 . 06070 0 0 0 0 0	0608000000000.
<b>0609</b> 0 0 0 0 0 0	0610 000000000.0611000000	0612 00000000.061300000	0614 0 0 0 0 0 0 0 0 0 . 06150 0 0 0 0	0616 000000000.
<b>0617</b> 00000	0618 000000000.061900000	0620 00000000.062100000	0622 0 0 0 0 0 0 0 0 . 06230 0 0 0 0	0624 000000000.
<b>0625</b> 0 0 0 0 0 0	0626 00000000.062700000	0628 00000000.062900000	<b>0630</b> 0 0 0 0 0 0 0 0 0 <b>. 0631</b> 0 0 0 0 0 0	0632 0 0 0 0 0 0 0 0 0 .
<b>0633</b> 0 0 0 0 0 0	0634 00000000.063500000	0636 00000000.063700000	0638 0 0 0 0 0 0 0 0 0 . 06390 0 0 0 0 0	0640 000000000.
<b>0641</b> 000000	0642 000000000.064300000	<b>0644</b> 00000000 <b>.0645</b> 00000	<b>0646</b> 000000000. Total	0647 0 0 0 0 0 0 0 0 0 0 .

#### 2008 VIRGINIA Schedule VK-1 (Form 502)

## Owner's Share of Income And Virginia Modifications And Credits



□Fi		Che	eck Here if	Owner is Partici	pating in an Individual Unified Nonresi	dent Return  □ •
□Ar	mended Return ●  Owner Informati			'	Pass-Through Entity (PTE)	
Name	е	FEIN or S		Name	0050	FEIN
Addre		0	057	Address		0056 Tax Year End Date
Addre	0059			Address	0051	
	0060				0052	
	or Town, State And ZIP Code			0053	wn, State And ZIP Code <b>0054 0055</b>	
				0033	0004 0000	
	ditional Owner Information	<b></b>		(DD 10000)		
b.	Owner's Entity Type (Enter code; see in					
C.	Owner's Participation Type (Enter code		,			
d.	Owner's Participation Percentage (Exa					0004
e.	Amount Withheld by PTE for Owner					0064
f.	If Owner or Entity is exempt from withhou	olding enter e	xemption o	code (see instruc	etions)	•
	tributive or Pro Rata Income and instructions.	Deductions				
1.	Total of Taxable Income Amounts					.00
2.	Total of Deductions					.00
3.	Tax-exempt Interest Income					.00
Allo	ocation and Apportionment					
4.	Income Allocated To Virginia (Owner's	Share From P	TE's Sche	dule 502A, Part	A, Line 2) 4.	.00
5.	Income Allocated Outside Of Virginia (C	Owner's Share	From PTE	E's Schedule 50	2A, Part A, Line 3e) 5.	.00
6.	Apportionable Income (Owner's Share	From PTE's S	Schedule 50	02A, Part A, Line	<del>2</del> 4)	.00
7.	Virginia Apportionment Percentage (Fro	om PTE's Sch	edule 502/	A, Part B or Part	C or 100%)	<u></u> %
Virg	ginia Additions - Owner's Share					
8.	Fixed-date Conformity - Depreciation					
9.	Fixed-date Conformity - Other					.00
10.	Net Income Tax Or Other Tax Used As	A Deduction I	n Determin	ing Taxable Inco	ome (See Instructions) 10.	.00
11.	Interest On Municipal Or State Obligation	ons Other Tha	an From Vi	rginia		.00
12.	Other additions (see instructions for ad Code Amour		_	Code	Amount	
12a		.00	12b			
12c		.00	[	12d		
13.	Total additions (add lines 8-11 and 12a-	·12d)				.00
Virg	ginia Subtractions - Owner's Shar	е				
14.	Fixed-date Conformity - Depreciation					.00
15.	Fixed-date Conformity - Other					.00
16.	Income From Obligations Of The United	d States				.00
17.	Other subtractions (see instructions for Code Amour		odes)	Code	Amount	
17a		.00	17b		.00	
17c		.00	17d		.00	
18.	Total Subtractions ( Add lines 14-16 and	-				.00

#### 2008 Va. Schedule VK-1 Page 2

Owner FEIN or SSN .		



**SECTION C - Virginia Tax Credits Nonrefundable Credits** 

No	nrefundable Credits	
1.	State Income Tax Paid (See instructions)	1
2.	Neighborhood Assistance Act Credit	2
3.	Enterprise Zone Act General Tax Credit	3
4.	Enterprise Zone Act Zone Investment Tax Credit	4 <b>.</b> 00
5.	Reserved for future use5	5
6.	Conservation Tillage Equipment Credit6	3
7.	Bio-Diesel Credit	7
8.	Fertilizer & Pesticide Application Equipment Credit	3
9.	Recyclable Materials Processing Equipment Credit	99.
10.	Rent Reduction Program Credit	.00
11.	Vehicle Emissions Testing Equipment Credit	.00
12.	Major Business Facility Job Tax Credit	2
13.	Clean Fuel Vehicle Job Creation Tax Credit	3
14.	Day-care Facility Investment Tax Credit	4 <u>.00</u>
15.	Low-income Housing Tax Credit	5
16.	Agricultural Best Management Practices Tax Credit	S
17.	Worker Retraining Credit	7
18.	Waste Motor Oil Burning Equipment Credit	3
19.	Riparian Forest Buffer Protection For Waterways	99.
	20. Virginia Coal And Production Incentive Tax Credit	
	21. Enter the amount of credit assigned to another party	
22.	Virginia Coal and Production Incentive Tax Credit available for use by owner (Subtract line 21 from line 20) 22	2
23.	Historic Rehabilitation Tax Credit	3
24.	Land Preservation Tax Credit	1
25.	Qualified Equity & Subordinated Debt Investments Tax Credit	5
26.	Total Nonrefundable credits ( Total lines 1-19 and 22-25)	S
Ref	rundable Credits	
27.	100% Coalfield Employment Enhancement and/or Virginia Coal Employment and Production Incentive Tax  Credits from Line 1 of your 2008 Schedule 306B	700
28.	25% Coalfield Employment Enhancement Tax Credit from Line 2 of your 2008 Schedule 306B	
	Full credit: Enter amount from 2008 Form 306, Line 12a	
	Full credit: Enter amount from your 2008 Form 306, line 12b	
31.	85% Credit: Enter amount from 2008 Form 306, line 13a	1
32.	90% Credit: Enter amount from your 2008 Form 306, line 13b	
33.	Total Coal Related Tax Credits allowable this year: Add Lines 29,	
21	30, 31 and 32	3
54.	2008 Coalfield Employment Enhancement Tax Credit earned to be used when completing your 2011 return.  Enter amount from your 2008 Form 306, Line 11	400_

#### **Notice**

You have received this Schedule VK-1 because the above named Pass-Through Entity (PTE) earned income from Virginia sources and has passed through to you a portion of that Virginia source income based on your ownership of the PTE. A copy of this schedule has been filed with the Virginia Department of Taxation. Everyone who receives Virginia source income is subject to taxation by Virginia regardless of state of residency or domicile. You may be required to file a Virginia tax return even though you may be a nonresident individual or a business domiciled outside of Virginia. To determine if you are required to file a Virginia income tax return, consult your tax professional. Information and forms may be obtained at www.tax.virginia.gov, or call the Virginia Department of Taxation at 804-367-8031 (individuals) or 804-367-8037 (businesses).

#### STAPLE HERE Virginia Part-Year Resident Income Tax

Deturn	ı	11
Return	l	ll

		k Applicable Boxes mended Return			May 1, 2009	h.m.o.m.to					
		Check if Result NOL	Attach a copy of federal retur			nments	:				
305-29	] Fix	xed Date <b>315-11</b>	Your First Name 070-1	070-2	Last Name <b>060-1</b>		Suffix 0:60-3	•B Yo	our Social S	Security Number	
305-16	] Qı	odifications ualifying Farmer, sherman or	Spouse's First Name (if filing status 2 or 4) 070-3	мі <b>070-4</b>	Last Name <b>065-1</b>		Suffix <b>0.65-3</b>	•A Sp	055	cial Security Number	
305-17	Μe Ο [	erchant Seaman verseas on Due	Present Home Address (Number and Street, 075-1	or Rural Route) <b>080-1</b>				Earned Inc <b>315-9</b>	come Credit	Claimed on Federal R	eturn
305-18	Co	ate palfield Employment phancement Tax	City, Town or Post Office, and State 085-1		0	State ZIP 0		• 🗆	\$	350	.00
315-12	] Pa	redit Earned in 2008 ass Through ithholding (Attach	Name of Virginia City or County Where You \	Were a Resident o	n Jan. 1, 2009 <b>IMPORT</b>	ANT 110-2 City or	<b>110-3</b> □ County	Lo	, ,	e from Instructions 0-1	
	So	ch. VK-1) tes of Residence Virginia in 2008:	YOU - From 3 10-1 / /2008 month/day/year	To 310-2 month	/ <u>/2008</u> /day/year	SPOUSE - F	From 310-3 month	/ /200 n/day/year	<u>8</u> то <b>3</b> ′	<b>10-4</b> / /2008 month/day/year	-
		FILING	S STATUS (CHECK ONLY ONE)	Г	005.0	EXEMP	TIONS (Enter	r Number	) —		
			305-	4 You	305-8 Dependents	To	otal Section 1	65 or <u>over</u> Blind	1	Total Sect	tion 2
305-3			ing federal Head of Household? YES	<sup>)</sup> 305-5 1	+ 320-7	X \$930 =	20.5			X \$800 =	
305-3	2	(Even if only one	ng Joint Return	305-5 2	+ = 320-7	X \$930 =	303	5-6 30 <u>5-</u> +		x \$800 =	
305-3	3	_ ` _ `	ng Separate Returns	0000	305-8		305	-6 3 <u>05</u> -			
000 0		(Enter spouse's	<b>.</b>	305-5 1	+ = 320-7	X \$930 =		+		X \$800 =	
		Spouse's full na	ame		305-8		305	-6 305	-7 320-	8	_
305-3	4	•	ng Separately Column B: Yourself	305-5 1		′_X \$930= _	305	0 +305		% \$800 =	B
			bined Return Column A: Spouse	305-10 <sup>1</sup>		X \$930 =		<u></u>		X \$800 =	A
		If both husl	sband and wife had income, using Filing Sta ss tax than Filing Status 2 (see instructions	atus 4 may	305-13 Add the Total of	f Section 1	305 plus the Tota	i-11 305 al of Sect	-12 320- tion 2.	10 Use the sum wh	ien
<u>ē</u> -				-			completing	Line 12 Spouse		Yourself	
1099-R and VK-1 here	5	Dependent on An	nother's Return (See the instructions f	or Line 11.)		305-15		lse only whe	n Filing	B For use by all	
<del>7</del>								Status 4 is ch		other filers.	_
> p			OSS INCOME (from Line 32, Col. A					310-6	00	310-5	00
an			ine 36, Part II, on Page 2					310-8	00	310-7	00
9-R			nes 6 and 7)					315-2	00	315-1	00
60			m Line 45, Part III, on Page 2					320-3	00	315-8	00
(J)			STED GROSS INCOME (subtract L		,			320-4	00	320-2	00
orms W-2, W-2G,	11		duction from Line 46(e), Part IV, on					355	00	370	00
,<	40		uctions from Line 47(c), Part V, on					365	00	360	00
Š		•	tion Amount (See instruction to pr	•	,			380	00	375	00
ns		,	. NPY, Part II, Line 2)					390	00	385	00
			nes 11(a) or 11(b), 12 and 13) Income (subtract Line 14 from Line					400	00	395	00
<u>ө</u>								410	00	405	00
Staple			m Tax Table or Tax Rate Schedule.					585	00	425 445	00
Ó		,	I column A and column B, Line 16). a Income Tax Withheld (Attach Fori							450	00
	10		a income Tax Withheld (Attach Fon irginia Income Tax Withheld (Attach							455	00
		. , .	2008 Estimated Tax Payments (Incl			,			. ,	465	00
			Payment - Form 760IP							470	00
		` '	or Low Income Individuals or VA Ea						. ,	475	00
e.			ax Paid to Another State from Sche							480	00
r he			n attached Schedule CR. If claiming							485	00
rde	19		ITS AND CREDITS [add Lines 18(a							490	00
ō			er than Line 19, enter the difference	,						495	00
one		-	er than Line 17, enter the difference							500	00
Ĕ.		_	enalty and interest from Schedule I						22	505	00
ō			ayment on Line 21 to be <b>CREDITED</b> 1							510	00
eck			d Consumer's Use Tax from Sched							515	00
Ę			e 23 (Columns A and B) and Line 2		·					520	00
Staple check or money order here.		If you owe tax on larger than Line 2	n Line 20, add Lines 20 and 25 - <b>OF</b> 21, enter the difference. This is the k here if credit card payment has be	R - If Line 21 is AMOUNT YO	s an overpayment U OWE. Attach pa	and Line 25	is			525	00
_	27		r than Line 25, subtract Line 25 from			REFUNDED	ΤΟ ΥΟΙΙ		27	530	00
-	<u>~1</u>	For Local Use	than Ellio 20, Subtract Ellio 23 HOIII		1	Office Use				Coding	1 00

Use Only



00

710

PART I - SCHEDULE OF INCOME AND ADJUSTMENTS (See in	nstructions)	E'S IN	COME WHEN	N FILIN			UST COMPL		HIS SCHE			
28 Income:	Column A	n	Column Income W	/hile	Column .	e NOT	Column I	n	Column Income V	Vhile	Column Income While	le NOT
	Federal Ref	-	Virginia Res		Virginia Res		Federal Re	-	Virginia Re		Virginia Res	
(a) Wages, salaries, tips and other compensation28(a)	755 760	00	825	00	900	00	720	00	790	00	860	00
(b) Interest and dividends(b)		00	830	00		00	725	00	795	00	865	0(
(c) Pension and other income (attach explanation)(c)	<u>765</u>	00	835	00	905	00	730	00	800	00	870	0
29 Gross income [add Lines 28 (a), (b) and (c)]29	770	00	840	00	910	00	735	00	805	00	875	0(
30 Adjustments to income: moving expenses30	775	00	845	00	915	00	740	00	810	00	880	0
31 Other income adjustments (attach explanation)31	780	00	850	00	920	00	745	00	815	00	885	0
32 Adjusted gross income (Line 29 less Lines 30 and 31)*32	785	00	855	00	925	00	750	00	820	00	890	0(
(a) Net fixed date conformity modifications(a)	0055	00	0053	00	0051	00	0054	00	0052	00	0050	0
(b) Fixed date conformity FAGI [add Lines 32 and 32(a)](b)	0061	00	0059	00	0057	00	0060	00	0058	00	0056	00
*Enter the amount from Line 32, Col. A1 on Page 1, Line 6 Co	ol A Entorti	ho an	nount from	Lino 3	2 Col B1 c	n Dage	. 1 Lino 6 Col	D				
PART II - ADDITIONS TO FEDERAL ADJUSTED GROSS INCOM		ne an	iount ironi	LINE 3	2, COI. DT	ni raye	↑ Spouse		ואר	<u> </u>	Yourself	
FART II - ADDITIONS TO FEDERAL ADJUSTED GROSS INCOM	VIE						when Fil	ing Sta	tus 4	В	For use by a	all
33 Special fixed date conformity addition						33	625	necked	00	62	other filers	00
34 Interest earned while a Virginia resident on obligations of other							550		00	54		00
35 Other additions to federal adjusted gross income as provided							560		00	55		00
36 TOTAL ADDITIONS (add Lines 33 through 35) Enter here and							570		00	56		00
PART III - SUBTRACTIONS FROM FEDERAL ADJUSTED GRO			ge 1				370			- 30	,,,	+00
37 Special fixed date conformity subtraction						27	635		00	63	3 <b>0</b>	00
· · · · · · · · · · · · · · · · · · ·									00		15-3	00
38 Age deduction from Sch. NPY, Part I, Line 4						30	315-4	•	00	3	13-3	100
39 State income tax refund or overpayment credit reported as in received while a Virginia resident. (Claim in the same column					.)	39	575		00	31	5-7	00
40 Income attributable to your period of residence outside Virgin					,		590		00	58		00
41 Income (interest, dividends or gains) received while a Virginia				,					<del>                                      </del>			+
securities of the U.S. exempt from state income tax, but not fi						41	600		00	59	95	00
42 Social Security and equivalent Tier 1 Railroad Retirement Act income on your federal return and attributable to your period						42	605		00	31	5-6	00
43 Disability income received while a Virginia resident and repor (or payment in lieu of wages) on account of permanent and to You cannot claim an Age Deduction on Line 38 and the disab	otal disability	, 3	305-39 □ 305-38 □ see instructi	] You		43	615		00	6′	10	00
44 Other subtractions - refer to the instruction book for Other Su	btraction Co	des		00								
(a) Enter 2 digit code in box			305-			44(a)	645		00	64	40	00
(b) Enter 2 digit code in box			<b>≥</b> 305.	-34		(b)	655		00	6	50	00
(c) Enter 2 digit code in box			▶ 305	-35		(c)	665		00	6	60	00
45 TOTAL CURTRACTIONS ( - -			0 D	4		45	CZE		00		70	00

(=) = =9		055		000		
(c) Enter 2 digit code in box	— <b>305-35</b> (c)	665	00	660		00
45 TOTAL SUBTRACTIONS - (add Lines 37 through 44c). Enter here and on I	Line 9 on Page 145	675	00	670		00
ART IV - STANDARD DEDUCTION (The standard deduction must be claimed unless	itemized deductions were claimed on your fe	deral return - see ins	structions.)			
46 (a) Fixed date conformity Federal ADJUSTED GROSS INCOME (total of L	ine 32(b), Columns A1 + B1 from Part I a	bove)	46(a)	680		00
(b) Fixed date conformity income attributable to Virginia residence (total of	Line 32(b), Columns A2 + B2 from Part I	above)	(b)	685		00
(c) Percentage of full standard deduction allowable [amount shown on Line 46(a)]. Enter to only one decimal place (Ex.: 12.2%)			(c)	690	%	
(d) Filing Status 1: Enter \$3,000; Filing Status 2 or 4: Enter \$6,000; Filing Status 2 or 4:	Status 3: Enter \$3,000		(d)	695		00
(e) Multiply Line 46(c) by Line 46(d). Enter here and on Line 11(a) on front. you may allocate this amount between husband and wife, as mutually a			(e)	700		00
ART V - ITEMIZED DEDUCTIONS (If you itemized deductions on your federal retr 47 (a) Itemized deductions from Schedule A Worksheet paid while a Virginia re				705		00

(c) Allowable Virginia itemized deductions: Subtract Line 47(b) from Line 47(a). Enter here and on Line 11(b) on Page 1. 715 00 If using Filing Status 4, you may allocate this amount between husband and wife, as mutually agreed  $\dots$ I (We) authorize the Department of Taxation to discuss this return with my (our) preparer. 

305-24 I (We), the undersigned, declare under penalty of law that I (we) have examined this return and to the best of my (our) knowledge, it is a true, correct and complete return. We agree that filing separately on this combined return makes us jointly and severally liable for the amount of tax shown to be due on this return and any refunds will be made payable to us jointly.

(b) State and local income taxes claimed on Schedule A and included on Line 47(a).....(b)

cturri and	any returnes will be made payable to as jointly.					
	Your Signature	Date [	Check if	Your Business Phone Number	•	Home Phone Number
	X	305-4	10 Deceased	305-20		115-1
Disease	Spouse's Signature (if filing status 2 or 4 both must sign)	Date	Check if	Spouse's Business Phone Number	•	
Please Sign Here	x	305-4	1 Deceased	305-21		
	Preparer's Signature	Date		Preparer's Phone Number		Preparer's FEIN/PTIN/SSN
	x			300-3		050-1 OR 050-2
D	Firm's Name (or Yours if Self-Employed)					Code
Preparer's						305-37 ●



### 2008 Virginia Nonresident Income Tax Return



	Che	ck Applicable Boxes:	Due May	<mark>/</mark> 1, 2009								
315	-10 <sub>lf</sub>	mended Return - Check Result Of NOL	Attach complete copy Part-Year Resident: If yo				•	-			use Form 760PY.	
305	- <b>29</b> M	lodifications	Your First Name		MI	Last Name		Suffix	k Yo	ur Social Se	curity Number	
205	Дo	verseas On Due Date	070-1		070	0-2	060-1	060-	3 •	003		
305 205.	∐ Q	Qualifying Farmer, Fisher- nan Or Merchant Seaman	Spouse's First Name (Joint Retu	ırns Only)	МІ	Last Name		Suffix	K Sp	ouse's Socia	al Security Number	
,05		lame(s) And Address	070-3		07	0-4	065-1	065-	.3	055		
305	- <b>27</b> D	oifferent Than Shown	Present Home Address (Numbe	r and Street	or Rur	al Route)			Sta	ate of Reside	ence	
	_	n 2007 Virginia Return	075-1						•	305-2	5	
05-		coalfield Employment Inhancement Tax	City, Town or Post Office					State	ZIF	Code		
		redit Earned in 2008	085-1	095-1				305	-29	100-1		
315	<b>-12</b> In	ass-Through Withholding ncluded With This Return Attach Form VK-1)	Important - Name of Virginia Ci income source is located	ty or County	in whi	ch principal pla	ace of business, en City O	nployment or	Lo	cality Code f	rom Instructions	
	,	ing Status (Check On	ılv One)		EXI	EMPTIONS	110-2	Total			Total	
					You	Dependents				er Blind	Section	2
	1 L 30	└─ <b>│ Single</b> <b>05-3</b> (Did vou claim federa	<b>305-4</b> al head of household? YES ☐ )	305-5	5 1	+ 305-8 =	320-7 X \$930=	\$		+	X\$800 = \\$	
	2 [		oint Return (BOTH must have \	/irginia <b>305-5</b>	5 2	+ 305-8 =	320-7 X \$930=	\$		+ 🔲 = 📗	X\$800 =  \$	
	3	,	Has No Income From Any S	ource305-5	5 2	+ 305-8 =	320-7 X \$930=	\$	303-0	+ = =	X\$800 = \\$	
		05-3 (Enter spouse's SSN	above)			3000			305-6	305-7 32	20-8	
		Spouse's full name _										
	4	Married, Filing Se	eparate Returns (Enter spouse	e's SSN <b>305-5</b>	1	+ 305-8 = 3	320-7 X \$930=			+ 🔲 =	X\$800 = \$	
	30	J5-3 above)					Add the Tete			305-7 32		
oj.		Spouse's full name _					Add the Tota			on Line 10ta	al of Section 2.	
and VK-1 here	5	Dependent On Anoti	her's Return (See the instructi	ons for Line	11.)					5 🗌 •	Enter whole dollars o	nly.
_ [	6	ADJUSTED GROSS	INCOME from your federal re	eturn ( <b>not f</b> e	edera	l taxable in	come)		30	) <b>5-15</b> <sub>6</sub>	310-5	00
Š			2, Part I, on Page 2								310-7	00
and	8	Subtotal (Add Line 6	and Line 7)							8	315-1	00
	9	Subtractions from Line	e 40, Part II, on Page 2							9	315-8	00
1099-R	10	VIRGINIA ADJUSTED	GROSS INCOME (Subtract	Line 9 fron	n Line	8)				10	320-2	00
,	11	Standard Deduction for	rom Line 41, Part III, <u>OR</u> Item	ized Deduc	tions	from Line 44	1, Part IV on Pag	je 2		11	540	00
W-2G,	12	Enter the <b>Exemption</b>	Amount computed above. E	nter the sur	n of t	he dollar am	ounts from Secti	ons 1 and 2		12	375	00
γ, >	13	Deductions (Schedule	e NPY, Part II Line 2)							13	385	00
W-2,	14	Subtotal (Add Lines 1	1, 12 and 13)							14	395	00
Forms			outed as a resident (Subtract								405	00
Fo		-	59, Part V, on Page 2 [Enter				. ,-				415	%
<u>ple</u>	17	NONRESIDENT TAX	ABLE INCOME (Multiply Line	15 by perc	entag	ge on Line 16	3)			17	420	00
Sta			x Table or Tax Rate Schedule								425	00
	19	(a) Your Virginia incor	me tax withheld (Attach Form	s W-2, W-2	G, 10	99-R and Vk	ζ-1)			19(a)	450	00
_		( ) .	income tax withheld (Attach F			-	,			` '	455	00
			x payments (Include credit fro								465	00
			nt - Form 760IP							. ,	470	00
		• •	Income Individuals or VA Ea							. ,	475	00
-		• •	to another state from Schedu							` '	480	00
here.	00		ned Schedule CR. If claiming I				-			,	485	00
rhe			ND CREDITS [Add Lines 19(	,							490	00
order		•	in Line 20, enter the difference								495	00
_			in Line 18, enter the difference								500	00
money			ty and interest from Schedule								505	00
			ent on Line 22 to be <b>CREDITI</b> chedule NPY, Part VI, Line 7.								<u>510</u>	00
ž o			and Line 25								<u>515</u> 520	00
hec			e 21, add Lines 21 and 26 - <b>0</b>							20	- J20	100
aple check	۲1	larger than Line 22, e	nter the difference. This is the	<b>AMOUNT</b>	YOU	OWE. Attac	h payment			27		00
tapi		→ Check here if cred	lit card payment has been ma	ide 🔲 <b>30</b>	5-19						525	4
Ñ			n Line 26, subtract Line 26 fro		This is	s the amount		D TO YOU.		28	530	00
_		Local Use lept. of Taxation 2601044 RI	EV. 05/08	LTD			For Office Use				Coding	

FO	RM 763 (2008) Page 2										
Nam	е	SSN									
PAR	T I - ADDITIONS TO FEDERAL ADJUSTED GF	ROSS INCOME									
29	Interest on obligations of other states, exempt fr	om federal income ta	ax, but not state tax	x					29 •	545	00
30	Other additions to federal adjusted gross incom	e as provided in instr	uctions (Attach exp	olana	tion)				30 •	555	00
31	Special Fixed Date Conformity additions (See in	structions)							31 •	620	00
32	TOTAL ADDITIONS (Add Lines 29, 30 and 31).	,								565	00
PAR	T II - SUBTRACTIONS FROM FEDERAL ADJU	STED GROSS INCO	OME (FAGI). Read	instr	ructi	ions.					
33	Age Deduction: Enter the Adjusted Federal Adju	usted Gross Income	from Age Deductio	n Wo	rk S	heet, Lir	ne 8, if ap	plica	ıble8	885	
	For Filing Status 4, enter spouse's birth date		Col. A - Spouse		1 [		I. B - You				
	(a) Enter birth date (For Filing Status 2 and 3 borequired even if only one qualifies for an age		Month - Day - Ye. <b>875</b>	ar		Month 870	- Day - Ye	ear			
	(b) Enter Age Deduction (See instructions)	, , ,	315-4	00	•		15-3	0	0		
	(c) Add amounts on line 33(b) above and enter	the total on this line			] [				_ 33 ●	315-5	00
34	State income tax refund or overpayment credit r									315-7	00
35	Income on obligations or securities of the U.S. e		•							595	00
36	Social Security and equivalent Tier 1 Railroad Re	•								315-6	00
37	Disability income reported as wages (or paymer permanent and total disability		on account of <b>305</b> -	39□ 9	Spot	ıse				313-0	00
	You cannot claim an Age Deduction on Line	33 and the disability	-						51	610	00
38	Special Fixed Date Conformity subtractions (Se		•						38	630	00
	Other Subtractions - refer to the instruction bool	•								030	+
00		Enter 2 digit code in l					305-33	3	30a 🗪	640	00
		Enter 2 digit code in I								650	00
		Enter 2 digit code in I				-	-	- 1		660	00
40	TOTAL SUBTRACTIONS (Add Lines 33 thru 39						305-35	5	40	670	00
	T III - STANDARD DEDUCTION (Must be used	·							40	070	-
	Filing Status: 1 = \$3,000; 2 = \$6,000; 3 or 4 =								41 •	880	00
PAR	T IV - ITEMIZED DEDUCTIONS (If you itemized	deductions on your	federal return, see	Page	16	of the in	structions	s.)			
42	Total federal itemized deductions								42 •	320-5	00
43	State and local income taxes claimed on Sched	ule A (See instruction	s if your federal ite	emize	d de	ductions	s were re	duce	ed)43	320-6	00
44	TOTAL VIRGINIA ITEMIZED DEDUCTIONS (So	ubtract Line 43 from L	ine 42). Enter her	e and	on	Line 11	on Page	1	44	370	00
PAR	T V - NONRESIDENT ALLOCATION PERCENT	AGE SCHEDULE (S	See instructions)				COLUM			COLUMN E	
	Enter losses or negative numbers in brackets.						All Sour			Virginia Sourc	_
	Wages, salaries, tips, etc							20	00		00
46	Interest income							25	00	000	00
47	Dividends							30	00		00
48	Alimony received							35	00		00
49	Business income or loss							40	00	0.0	00
50	Capital gain or loss/capital gain distributions							45	00		00
51	Other gains or losses							50	00	020	00
52	Taxable pensions, annuities and IRA distribution	าร			:	52		55	00		
53	Rents, royalties, partnerships, estates, trusts, S	corporations, etc				53		60	00	830	00
54	Farm income or loss					54		65	00		00
55	Other income							75	00	845	00
56	Interest on obligations of other states from Line							80	00	000	00
57	Lump-sum distributions/accumulation distribution							85	00		00
58	TOTAL - Add Lines 45 through 57 and enter ea					58	7	90	00	860	00
59	Nonresident allocation percentage - Divide Line percentage to one decimal place, showing no mENTER here and on Line 16 on Page 1	ore than 100% but n	ot less than 0%. E	xamp	le: 5	5.4%.)			●59	865	%

I (We) authorize the Department of Taxation to discuss this return with my (our) preparer. 305+24
I (We), the undersigned, declare under penalty provided by law that I (we) have examined this return and to the best of my (our) knowledge, it is a true, correct and complete return.

	Your Signature	Date		Your Business Phone Number	Your Home Phone Number		
Please Sign	X		305-40 <sup>eceased</sup>	• 305-20	( )	115-1	
Here	Spouse's Signature (If a joint return, <b>both</b> must sign)	Date	☐ Check	Spouse's Business Phone Number	EIC Cla	aimed on federal return	
	×	305-41 if deceased		• 305-21	<b>●</b> <sub>315-9</sub> 350		
	Preparer's Signature	D	ate	Preparer's Phone Number 300-3	Preparer's FE	IN/PTIN/SSN 1 050-2	
Preparer's	X			300-3	• 050-	1 050-2	
Use Only	Firm's Name (or Yours if self-employed) and Address					<sup>Code</sup> 305-37	

## Schedule NPY Schedule of Adjustments For 2008 Nonresident or Part-Year Resident

Your Name As Shown On Virginia Return



Your Social Security Number

Attach this Schedule to your Form 760PY or Form 763

Spo	ouse's Name As Show	vn On Virginia Return			<b>A</b> Sp	ouse's Social Securit	y Numb	per	
fr	inter the Adjusted From Age Deduction	PY ONLY - Age Deduction - Rea Federal Adjusted Gross Income Worksheet, Line 8, if applicable	0142 Month-Day-Yi	00	eting				
						A Spouse		<b>B</b> You	
						Month-Day-Year		Month-Day-Year	ſ
1		(For Filing Status 2 and 4: Both birth ed even if only one qualifies for an age of	deduction)		1.	<sup>-</sup> 0051 <sup>-</sup>		70050	
2	. Enter Age Deduc	ction (See instructions)			2.	0053	00	0052	00
3	. Enter the amoun	t from the Ratio Schedule for the date y	ou moved into or	out of Virginia	3.	0055.		0054.	
4	. Qualifying Age	<b>Deduction</b> - Multiply Line 2 by Line 3 a	nd enter here		4.	0057	00	0056	00
	Filing Status 2 - Tra Filing Status 4 - Tra	s - Transfer amount from Line 4, Col. B to Forn ansfer the total of Line 4, Col. A & B to Form ansfer the amounts from Line 4 to Form 760P	760PY, Line 38, Col. PY, Line 38, Col. A &	В	disab	•	tion o	deduction and the n Form 760PY, Part II nefits you the most.	,
		ns from Virginia Adjusted Gro	ss Income			A SPOUSE This column for 7 Filing Status 4 filer		В уои	
1		n 760PY or 763 instruction ion Codes	1a.	0144	$\neg \mid$	0146	00	0145	00
			1b.	0147		0149	00	0148	00
			1c.	0150		0152	00	0151	00
•	in the applicable from Column B  till - Tax Creditist below the nar If more room is no	Y filing status 4 filers, enter the total for e column on Form 760PY Line 13. All of on Line 13, Column B, of Form 760PY cit For Low Income Individuals me, Social Security Number (SSN) and seeded, attach a schedule with the name	ther filers, enter the or Line 13 of Form or Virginia Ea Guideline Income a, SSN and Guideli	e total 1763 arned Inco for you, your ne Income for	ome Cr spouse a	and each depender dditional dependen		0153	00
	Complete all of Pa	art III. Failure to complete this Part may  Name	result in this credi			allowed. imber (SSN)		Guideline Incor	—— me
 1.	Yourself	0058				059	+	0060	00
2.	Spouse	0061				062	+	0063	00
а.		0064			_	065	+	0066	00
b.		0067				168	+	0069	00
3.	· .	Leline Income (Be sure to include inform	nation from attache	ed schedule, it			3.	0070	00
4.	Enter the total nu family Guideline I do not qualify for	Imber of exemptions listed above and or Income from Line 3 and the poverty guid the Tax Credit for Low Income Individual and proceed to Line 7	n any attached sch delines in the instra als but claimed an	nedule. Based uctions, deter Earned Incon	l on this mine you ne Credit	total, the total ur eligibility. If you t on your federal		0071	
5.	If eligible, enter th	ne number of personal exemptions from	Form 760PY or F	orm 763			.5.	0072	
3.	credit but claimed an Earned Income Credit on your federal return, enter \$0 and proc					7	.6.	0073	
7.	Enter the amount of Earned Income Credit claimed on your federal return. If you did r Income credit on your federal return, enter \$0. If you are married filing separately, be						.7.	0074	
8.	Multiply Line 7 by 20% (.20)							0075	
9.	-	of Line 6 or Line 8				.9.	0076		
10.	Compare the amo	ount of tax on Form 760PY, Line 17, or	18, to the am	nount on	Line 9 above.		0077		

Enter the lower amount here. This is your tax credit. Enter on Form 760PY, Line 18(e), or Form 763, Line 19(e) .....10.

### Schedule NPY 2008 Page 2



								_
Your N	Name As Shown On Virginia Return	B Your Social Security Number						
Spous	se's Name As Shown On Virginia Return	A	Spouse's S	Social Securi	ty Numb	er		
	IV - Credit For Tax Paid To Another State ach copy of that state's return.			SPOUSE s column for ng Status 4 fi		В уои		
1. E	Enter qualifying taxable income base for other state's taxes. (See Instructions)	1.		0082	00	0081	00	•
2. V	rirginia Taxable Income - Enter amount from Form 760PY, Line 15 or Form 763, Line 17	7 2.		0084	00	0083	00	•
3. E	Enter qualifying tax paid to other state. (See instructions.) Other state:087	3.		0086	00	0085	00	•
4. V	riginia Income Tax - Enter the amount from Form 760PY, Line 16 or from Form 763, Line	18 4.		0089	00	0088	00	
	ncome Percentage - If filing Form 760PY, divide Line 1 by Line 2. If filing Form 763, livide Line 2 by Line 1. Compute to 1 decimal place not to exceed 100% (For ex, 1.6%).	5.		0091	. %	0090.	%	•
6. F	Form 760PY filers, multiply Line 4 by Line 5. Form 763 filers, multiply Line 3 by Line 5	6.		0093	00	0092	00	•
	Credit - Form 760PY filers, enter the lesser of Lines 3 or 6. Form 763 filers, enter the esser of Lines 4 or 6.	7.		0095	00	0094	00	•
N	<b>Fotal</b> - Add Line 7, Col. A and Col. B. Also enter on Form 760PY, Line 18(f), or Form 76 <b>Note:</b> The sum of Line 10, Part III and Line 8, Part IV, cannot exceed your tax liability. A necessary to ensure sum does not exceed tax liability.	djust Lii	ne 8, Par		8.	0096	00	•
• S	V - Addition to Tax, Penalty and Interest see Instructions Addition to Tax - Enter the amount from Form 760C or 760F, whichever is applicable.				1.	0097	00	•
	Penalty - See instructions. If owed, check one and enter amount:  B□ ■ Late Filing Penalty or 0099□ ■ Extension Penalty				2.	0100	00	•
3.	Interest - Compute on amount from Form 760PY, Line 20, or Form 763, Line 21. See					0101	00	•
4.	Total - Add Lines 1, 2 and 3. Enter here and on Form 760PY, Line 22, or Form 763, L	_ine 23		4	4.	0102	00	•
	VI - Contributions and Consumer's Use Tax (See instructions)  Voluntary Contributions From Overpaid Taxes			Code		Amount		_
٠.	Enter the code for the organization and the contribution amount(s) in boxes 1a and	1b.	1a.	0103		0104	00	•
	If you are donating to more than 2 qualifying organizations, enter the code "00" in the first box and the total amount of all donations. Attach a separate page indicating the amount you wish to contribute to each organization. See Instructions for contribution codes.		1b.	0105		0106	00	•
2.	Total Voluntary Contributions - Add Lines 1a and 1b  This subtotal may not exceed the amount on Form 760PY, Line 21 minus the total of Lines 22 and 23; or Form 763, Line 22 minus the total of Lines 23 and 24				2.	0119	00	•
3.	Other Voluntary Contributions Enter the code of the organization and the contribution amount(s) in boxes 3a and 3	3b.	3a.	0120		0121	00	•
	If you are donating to more than 2 qualifying organizations, enter the code "00" in the first box and the total amount of all donations. Attach a separate page indicating the amount you wish to contribute to each organization. See Instructions for contribution codes.		3b.	0122		0123	00	•
4.	Public School Foundations				_			,
	Enter the code of the foundation and the contribution amount in boxes 4a and 4b  4a.	C	125			0126	00	•
	If you are donating to more than 2 school foundations, enter "999999" in the first box and the total amount of donations. Attach a separate page indicating the amount you wish to contribute to each foundation.  See Instructions for foundations codes.		127		L	0128	00	•
5.	Total Contributions - Add Line 2, Lines 3a and 3b and Lines 4a and 4b				5.	0131	00	•
6.	Consumer's Use Tax				6.	0132	00	•
7.	<b>Total Contributions and Consumer's Use Tax</b> - Add Lines 5 and 6 Enter this amount on Form 760PY, Line 24 or Form 763, Line 25				7.	0133	00	•

		CTED (if checked)			
PAYER'S name, street address, city, 050	state, ZIP code, and telephone no.	1 Unemployment compensation	OMB No. 1545-0120		Certain
051		\$ 066	2008		Government
052 053 054 055		2 State or local income tax refunds, credits, or offsets	<u>~</u> 000		Payments
056		\$ 067	Form 1099-G		
PAYER'S federal identification number 057	RECIPIENT'S Identification number 058	3 Box 2 amount is for tax year 068	4 Federal Income tax v \$ 069	vithheid	Copy B For Recipient
RECIPIENT'S name		5 ATAA payments	6 Taxable grants		This is important tax
059		\$ 073	\$ 070		information and is being turnished to the internal Revenue
Street address (including apt. no.) 060		7 Agriculture payments \$ 071	8 Box 2 is trade or business income •	072	Service. If you are required to file a return, a negligence penalty or
061 CHy, state, and ZIP code 062 063 064					imposed on you if this income is taxable and
Account number (see instructions) 065					the IRS determines that it has not been reported.

Form 1099-G

(keep for your records)

Department of the Treasury - Internal Revenue Service

□ VOID □ CORRECTED								
PAYER'8 name, street address, city,	state, ZIP code, and telephone no.	1	Rents	ОМ	IB No. 1545-0115	]		
050		\$	067	@@00			Miscellaneous	
051		-	Royattles		2008	'	Income	
052								
053 054 055		\$	068	For	m 1099-MISC		<u> </u>	
		3	Other Income	4	Federal income tax	withheld		
056		\$	069	\$	070		Copy 1	
PAYER'S federal identification number	RECIPIENTS identification number	5	Fishing boat proceeds	6	Medical and health care	e payments	For State Tax Department	
057	058	\$	071	\$	072			
RECIPIENT'8 name		7	Nonemployee compensation	8	Substitute payments i dividends or interest	in lies of		
059		\$	073	\$	074			
Street address (including apt. no.)		9	Payer made direct sales of \$5,000 or more of consumer	10	Crop Insurance pr	roceeds		
060 061			products to a buyer (recipient) for resale ►075	\$	076			
City, state, and ZIP code				12				
062 063 064								
Account number (see Instructions)		13	Excess golden parachute payments	14	Gross proceeds p an attorney	said to		
065		\$	077	\$	078			
15a Section 400A deferrals	15b Section 409A Income	16	State tax withheld 079	_	State/Payer's stat 080 081		18 State Income § 082	
\$ 087	\$ 088	\$	083		084 085		\$ 086	

Form 1099-MISC

Department of the Treasury - Internal Revenue Service

#### VA-8879 Virginia Department of Taxation

#### Virginia e-file Signature Authorization

Tax Year 2008

Declaration Control Number ▶				
Your Name	<b>B</b> Your So	cial Security #		
Spouse's Name	A Spouse's Social Security #			
Part I Tax Return Information	A Spouse	B Yourself		
1. Virginia Adjusted Gross Income (Form 760CG, line 9; 760PY, line 10, columns B & A; Form 763, line 10)				
2. Amount you Owe (Form 760CG; Form 760PY, line 26; Form 763, line 27)				
3. Refund (Form 760CG; 760PY, line 27; Form 763, line 28)				
Part II Declaration of Taxpayer and Signature Authorization				
December 31, 2008, and to the best of my knowledge and belief, it is true, correct and complete. I further declare that Return Originator (ERO), Transmitter, or Intermediate Service Provider (including my name, address and social securit number) and the amount shown in Part I above agree with the information and amounts shown on the corresponding lifting a balance due return, I understand that if the Virginia Department of Taxation does not receive full and timely pay ax liability and all applicable interest and penalties. I authorize my ERO, Transmitter or Intermediate Service Provider Department of Taxation. I have selected a personal identification number (PIN) as my signature for my electronic inco Funds Withdrawal Consent (direct debit).	y number or individual ta nes of my electronic inco ment of my tax liability, I to transmit my complete	ax identification ome tax return. If I an remain liable for the e return to the Virginia		
Taxpayer's PIN: check one box only				
I authorize the ERO named below to enter my PIN as my signature on my 2008 e-filed V	irginia individual income	tax return.		
Do not enter all zeros				
■ I will enter my PIN as my signature on my 2008 e-filed Virginia individual income tax return. Check this box only return is filed using the Practitioner PIN method. The ERO must complete Part III below.	y if you are entering you	r own PIN and your		
Your signature ▶ Date ▶				
Spouse's PIN: check one box only				
I authorize the ERO named below to enter my PIN as my signature on my 2008 e-filed V Do not enter all zeros	irginia individual income	tax return.		
ERO  I will enter my PIN as my signature on my 2008 e-filed Virginia individual income tax return. Check this box only return is filed using the Practitioner PIN method. The ERO must complete Part III below.	y if you are entering you	r own PIN and your		
Spouse's signature ▶ Date ▶				
Part III Certification and Authentication – Practitioner PIN Method Only				
ERO's EFIN/PIN: Enter your six digit EFIN followed by your five digit self-selected PIN.				
Do not enter all	zeros			
I certify that the above numeric entry is my PIN, which is my signature for the 2008 Virginia individual income tax return that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Virginia's publi Filers of Individual Income Tax Returns.	for the taxpayer(s) indi			
ERO's signature ▶ Date ▶ _				
Date P				

#### **Purpose of Form**

Complete form VA-8879 when the Practitioner PIN method is used or when the taxpayer authorizes the electronic return originator (ERO) to enter or generate the taxpayer's personal identification number (PIN) on his or her e-filed individual income tax return.

This form should be retained by the ERO. Do not send this form to the Virginia Department of Taxation or the IRS.

#### When and How To Complete

IF the ERO is	THEN		
Not using the Practitioner PIN method and the taxpayer enters his or her own PIN	Do not complete Form VA-8879		
Submitting Form VA-8453	Do not complete Form VA-8879		
Using the Practitioner PIN method and is authorized to enter or generate the taxpayer's PIN.	Complete form VA-8879, Parts I, II and III.		
Using the Practitioner's PIN method and the taxpayer enters his or her own PIN.	Complete form VA-8879, Parts I, II and III.		
Not using the Practitioner PIN method and is authorized to enter or generate the taxpayer's PIN.	Complete form VA-8879, Parts I and II.		

#### **ERO Responsibilities**

The ERO will:

- Enter the name(s) and social security number(s) of the taxpayer(s) at the top of the form.
- Complete Part I using the amount from the taxpayer's 2008 tax return..
- Enter or generate, if authorized by the taxpayer, the taxpayer's PIN and enter it in the boxes provided in Part II.
- Enter on the authorization line in Part II the ERO firm name (not the name of the individual preparing the return) if the ERO is authorized to enter the taxpayer's PIN.
- After completing (1) through (4), give the taxpayer Form VA-8879 for completion and review. This can be done in person or by using the U.S. mail, a private delivery service, email, or an internet website.
- Enter the 14-digit Declaration Control Number (DCN)
   assigned to the tax return after the taxpayer completes Part
   II.

The ERO must receive the completed and signed Form VA-8879 from the taxpayer before the electronic return or request for refund is transmitted (or released for transmission).

#### **Taxpayer Responsibilities**

Taxpayers have the following responsibilities:

- Verify the accuracy of the prepared income tax return, including direct deposit information.
- Check the appropriate box in Part II to authorize the ERO to enter or generate their PIN or to do it themselves.
- Indicate or verify their PIN when authorizing the ERO to enter or generate it (the PIN must be five numbers other than all zeros.
- 4. Sign and date Form VA-8879.
- Return the completed Form VA-8879 to the ERO by hand delivery, U.S. mail, private delivery service or fax. Your return or request will not be transmitted to the Virginia Department of Taxation until the ERO receives your signed Form VA-8879.

# Virginia Individual Income Tax Declaration for Electronic Filing VA-8453 DO NOT SEND THIS VA-8453 TO THE VA DEPT. OF TAXATION OR THE IRS. IT MUST BE MAINTAINED IN YOUR FILES!

IRS Declaration Control Number (DCN)				
0 0 -         -   9		2008		
First name and initial (if joint or combined return, enter both)  Last Name	B Your Soc	ial Security #		
Present Home Address	A Snouse's S	ocial Security #		
Tresent frome Address		-		
City, State and Zip Code	On-line fi	On-line filed return		
Don't Toy Deliver Information	A Chausa	D. Vermoelf		
Part I Tax Return Information	A Spouse	B Yourself		
<ol> <li>Federal Adjusted Gross Income (Form 760CG, line 1; 760PY, line 6, columns B &amp; A; line 4; For</li> <li>Virginia Adjusted Gross Income (Form 760CG, line 9; 760PY, line 10, columns B &amp; A; Form 763</li> </ol>	·			
	5, life 10)			
3. Taxable Income (Form 760CG, line 14; 760PY, line 15, columns B & A; Form 763, line 15)				
4. Virginia Income Tax (Form 760CG, line 17; 760PY, line 16, columns B & A; Form 763 line 18)				
<ul><li>5. Withholding (Form 760CG, line 18b and a; 760PY, lines 18b &amp; 18a; Form 763, lines 19a &amp; 19b)</li><li>6. Amount you Owe (Form 760CG; Form 760PY, line 26; Form 763, line 27)</li></ul>				
<ul><li>6. Amount you Owe (Form 760CG; Form 760PY, line 26; Form 763, line 27)</li><li>7. Refund (Form 760CG; 760PY, line 27; Form 763, line 28)</li></ul>				
Part II Declaration of Taxpayer				
Lonsent that my refund he directly denosited as designated on my 2008 Virginia income	tax return. If I have filed a joint return, th	is is an irrevocable		
appointment of the other spouse as an agent to receive the refund.	•			
<b>b.</b> I do not want direct deposit of my refund <b>or</b> I am not receiving a refund.		atmeta tha financial		
I authorize the Virginia Department of Taxation and its designated Financial Agent to initial institution account indicated on my 2008 Virginia income tax return for payment of my state.				
I also authorize the financial institutions involved in the processing of the electronic payments				
answer inquiries and resolve issues related to the payment.				
I declare under penalties of perjury that I have compared the information on my return with the information on my return with the amounts shown on the engree of my				
the amounts described in Part I above agree with the amounts shown on the corresponding lines of my knowledge and belief, my return is true, correct and complete. I consent that my return including this d				
sent to the Internal Revenue Service (IRS) by my electronic return originator and by the IRS to the Virginia Department of Taxation. This declaration is to be retained				
by the ERO or transmitter as validation of my electronically filed Virginia income tax return.				
	Filing Status 2 or 4, BOTH must sign)	Date		
Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer  I declare that I have reviewed the above taxpayer's return and that the entries on this form are complete.	a and correct to the best of my knowledge	a I have obtained the		
taxpayer's signature on Form VA-8453 before submitting this return to the Internal Revenue Service (IF	RS) and the Virginia Department of Taxati	on. I have provided		
the taxpayer with a copy of all forms and information to be filed with the IRS and the Virginia Departme	nt of Taxation, and have followed all othe	r requirements as		
described in Pub. 1345, Handbook for Electronic Filers of Individual Income Tax Returns (Tax Year 200 of Taxation. If I am also the Paid Preparer, under penalties of perjury, I declare that I have examined the				
statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declara				
has any knowledge				
ERO's Signature Date	SSN			
Firm's name (or yours if self ampleyed)	Daid Dranavar2 DV DN Calf or	Mr VII Chavalan		
Firm's name (or yours if self-employed)	Paid Preparer? □Y □N   Self-er	mployed? □Y □N		
Address, City, State and Zip	EIN			
Paid Preparer's Signature Date	SSN			
	0.16 1 10 = 11 = 11			
Firm's name (or yours if self-employed)	Self-employed? □Y □N			
Address, City, State and Zip	EIN			

#### **Purpose of Form**

Use Form VA-8453 to:

- Authenticate the electronic portion of Form 760CG, 760PY or 763:
- Authorize the ERO to transmit via a third party transmitter or authorize the on-line filing company to transmit, and
- Provide the taxpayer's consent to directly deposit any overpayment.

#### When and Where to File

This form must be retained by the preparer/ERO for three (3) years or for online filed returns, the taxpayer must retain for three (3) years once the Virginia acknowledgment is received. For taxpayer-prepared returns, the transmitter must retain the form. Preparers, ERO's, transmitters and or taxpayers must make the documents available to the Department of Taxation upon request.

#### **Line Instructions**

**Declaration Control Number (DCN)**-The DCN is a 14 digit number assigned by the electronic filing software to each taxpayer's return. It must be clearly typed or printed in the top left corner. The ERO should enter this number only after the Virginia acknowledgment is received.

Name, Address, and Social Security Number-If the taxpayer received a mailing label from the Virginia Department of Taxation, place the label in the name area. Cross out any errors and print the correct information. Add any missing items such as apartment number. If the taxpayer did not receive a label, print or type the information in the space provided. Please verify that the social security number (SSN) is clear and correct. If it is a joint or combined return, be sure the names and SSN's are listed in the same order.

**P.O. Box**-If the post office does not deliver mail to the taxpayer's home and the taxpayer has a P.O. Box, enter the box number instead of the home address.

**On-line Filed Return**-This box should only be checked if the return is filed by the taxpayer via the Internet.

#### **Part I-Tax Return Information**

**Line 5.-**Do not include any withholding from Form 4852, Substitute W-2 or withholding paid to another state.

#### Part II-Declaration of Taxpayer

Taxpayers must check all applicable boxes on lines 8a through 8c.

If there is an amount on line 6 and the taxpayer checks box 8b and is paying by check or money order, mail the payment by May 2, 2004 with form 760-PMT to the applicable address shown in the instruction booklet

If the taxpayer checks box 8a **OR** 8c, the taxpayer must ensure that the following information relating to the financial institution account is provided in the tax preparation software:

- · Routing number
- Account number
- Type of account (checking or savings)
- Refund for overpayment returns (Note: refund will be deposited into taxpayer's account five to seven business days from date filed.)
- Debit amount for tax due returns (Note: debit from taxpayer's account will occur five to seven business days from date filed.)

### Part III-Declaration of Electronic Return Originator (ERO) and Paid Preparer

The Department of Taxation requires the ERO's signature.

A paid preparer must sign Form VA-8453 in the space for Paid Preparers. Only handwritten signatures are acceptable. If the paid preparer is also the ERO, do not complete the paid preparer section. Instead, check the box labeled "Check if also paid preparer".

**Automated Refund Information**-Refund information is available on Tele-Tax. See the instruction booklet for Form 760CG for a list of Tele-Tax information telephone numbers.

#### Virginia Department of Taxation Taxpayer Filing Election Opt Out Form

VA FORM 8454T

#### **General Information**

Previously, individual income tax returns preparers were required to be submitted to the Virginia Department of Taxation (TAX) using an electronic medium or, if submitted on paper, produced using software that generated a 2D barcode. House Bill 678, which was passed during the 2008 General Assembly session, modified this requirement to remove the option for paper filing with a 2D barcode. Therefore, effective for taxable years beginning on and after January 1, 2008 paid preparers who prepare 100 or more returns in a tax year must file all eligible returns electronically. If a return is not eligible for electronic filing, it may be filed on paper.

As a taxpayer receiving services from a tax preparer who is required by Virginia law to file all acceptable Virginia individual income tax returns electronically, you may elect to "Opt Out". That is, you may elect to not file your return electronically. Returns submitted electronically are processed faster and more accurately and at a lower cost.

If you elect to Opt Out, you are required to complete this form, which will be retained by your tax preparer. Completing and signing this form will indicate that you have elected to not file your return electronically.

Reason for election:			
			<del></del>
			·····
			<del> </del>
Taxpayer's signature	Date	Preparer's or Firm's Name	
Spouse's signature (if filing jo	int) Date	Tax Preparer's Signature	Date
Taxpayer's Name(s) PLEASE PR	INT	Preparer's FEIN/PTIN/SSN	
Primary SSN	Spouse's SSN (if filing joint)		
Filliary 33IN	opouse's oon (II IIIIII JOINIL)		

#### **Instructions for Paid Tax Preparer**

Retain this form with your records for a period of three (3) years.

## Virginia Department of Taxation Paid Tax Preparer Hardship Waiver Request

#### **Hardship Waiver for Taxable Year**

**VA FORM 8454P** 

Previously, Individual income tax returns prepared by certain tax preparers were required to be submitted to the Virginia Department of Taxation (TAX) using an electronic medium or, if submitted on paper, produced using software that generated a 2D barcode. House Bill 678, which was passed during the 2008 General Assembly session, modified this requirement to remove the option for paper filing with a 2D barcode. Therefore, effective for taxable years beginning on and after January 1, 2008, paid preparers who prepare 100 or more returns in a tax year must file all eligible returns electronically. If a return is not eligible for electronic filing, it may be filed on paper.

The Tax Commissioner has the authority to waive the requirement to file electronically upon finding that the requirement would cause an undue hardship for the tax preparer. The tax preparer must request in writing a waiver from the Tax Commissioner and clearly demonstrate the nature of the undue hardship. Hardship waiver requests shall be responded to within 45 days of receipt.

Preparer's or Firm's Name			FEIN/PTIN/SSN	
Contact Person	E-MAIL Address		Telephone Number	
Street Address				
City		State	Zip Code	
Authorized Signature			Date	
A hardship waiver is being requested for the for	ollowing reason: (attach supporting do	cument	ation)	

#### Mail to:

Virginia Department of Taxation Hardship Waiver Request P.O. Box 27423 Richmond, Virginia 23261-7423

Fax: (804) 367-7013The Department of Taxation may accept or deny a Request for Waiver based on facts presented. For further information, call 804-367-6100.